METHICILLIN-RESISTANT *STAPHYLOCOCCUS AUREUS* AND VANCOMYCIN-RESISTANT *ENTEROCOCCUS* BLOODSTREAM INFECTIONS IN CALIFORNIA GENERAL ACUTE CARE HOSPITALS, APRIL 2010 THROUGH MARCH 2011

CALIFORNIA DEPARTMENT OF PUBLIC HEALTH
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EXECUTIVE SUMMARY

This report, for the period April 1, 2010 through March 31, 2011, is the second on methicillin-resistant *Staphylococcus aureus* (MRSA) and vancomycin-resistant *Enterococcus* (VRE) bloodstream infections (BSIs) developed by the California Department of Public Health (CDPH). It is the first by any agency in the US, using data submitted by hospitals to the Centers for Disease Control and Prevention (CDC) National Healthcare Safety Network (NHSN). Use of NHSN laboratory reporting methodology provided relative assurance of uniform identification of cases, while quality control and assurance process provided hospitals with guidance to encourage accurate and complete reporting. The quality of the data and the comparability of the rates in this report are in sharp contrast to the 2010 CDPH BSI report, which used quarterly summary reporting by hospitals on paper forms. These forms did not provide definitions for BSIs, so that cases may have been identified differently by hospitals, which in turn may be different from those used in the current report. Therefore, the rates in the two reports should not be compared.

MRSA and VRE are two of the most common organisms resistant to multiple antimicrobial drugs that cause infections in hospital patients. BSIs are among the most serious HAIs, resulting in increased lengths of hospital stay, higher hospital costs, and risk of death. Decreases in MRSA BSIs have been reported recently in US hospitals. However, there is no national or state MRSA or VRE BSI data to use as benchmarks for California hospitals.

California Health and Safety Code Section 1288.55 (a)(1) requires general acute care hospitals to report to the CDPH all cases of healthcare-associated MRSA and VRE bloodstream infections, and the number of inpatient days. It requires the department to post on its web site the incidence rate of these infections. During April 1, 2010, through March 31, 2011, 361 (94.3%) of 383 California licensed general acute care hospitals reported at least 10 of 12 months of MRSA and VRE BSI data. In contrast, 87.7% of hospitals reported 4 or 5 quarters of MRSA and VRE BSI data in the previous reporting period. Of these 361 hospitals, 155 (42.9%) reported no MRSA BSI and 194 (53.7%) reported no VRE BSI.

We categorized hospitals according to hospital type and, for each hospital, provided the case mix index (a measure of severity of illness in hospital patient populations), and MRSA and VRE BSI rates. Each hospital was categorized into one of the following four types: major teaching (19 excluding pediatric), long-term acute care (LTAC, 21), pediatric (10), and community hospitals (311). Separation of hospitals into different categories with different rates of BSIs allows comparisons according to types of hospitals and, with caution, between hospitals within these types.

There were significant differences in MRSA BSI rates between the categories: major teaching (1.0 per 10,000 patient days) and LTAC (1.1 per 10,000 patient days) hospitals had higher incidence rates than pediatric (0.1 per 10,000 patient days) and community hospitals (0.5 per 10,000 patient days). For VRE BSI rates; major teaching (1.2 per 10,000 patient days) and LTAC (1.2 per 10,000 patient days) hospitals had higher

incidence rates than pediatric (0.2 per 10,000 patient days) and community hospitals (0.3 per 10,000 patient days). The higher rates of MRSA and VRE BSIs in major teaching and LTAC hospitals likely reflect the increased severity of illness in patients in these compared to community hospitals. The severity of illness in pediatric hospital patients appeared to be similar to major teaching hospitals and higher than community hospitals; their lower rates of these BSIs presumably result from factors specific to pediatric patients other than the measure of severity of illness reflected in the case mix index.

A number of hospitals had significantly higher or lower rates of BSIs when compared to other hospitals within their respective categories. Differences in the severity of illness in their patient populations, as measured in this report through the case mix index, may explain some but not all of these differences. It is also possible that differences in MRSA and VRE BSI rates may reflect differences in infection prevention efforts. Each hospital in this report should assess their MRSA and VRE BSI incidence rates and consider taking measures to address potential problems using the CDC guide to the Management of Multidrug-Resistant Organisms in Healthcare Settings.

There are no other reports of MRSA or VRE BSI incidence rates from NHSN data for comparison with this report, so it is not possible to compare these rates from California hospitals with national or other state data. However, these data serve as a baseline for to evaluate rates in California hospitals overtime. The use of NHSN laboratory reporting methodology provides consistent identification of BSIs in individual California hospitals that should be stable over time. The findings of this report indicate that enhanced efforts to prevent MRSA and VRE BSI may be indicated in some hospitals, and these efforts may be reflected in future CDPH reports.

INTRODUCTION

This report is a public disclosure of the numbers and rates of Methicillin-resistant *Staphylococcus aureus* (MRSA) and vancomycin-resistant *enterococcus* (VRE) bloodstream infections (BSIs) reported by hospitals for the period April 1, 2010 through March 31, 2011. This is the second report on MRSA and VRE BSI developed by CDPH [1] and the first report using data submitted by hospitals using National Healthcare Safety Network (NHSN). The NHSN is a web-based surveillance and reporting system for healthcare associated infections (HAIs) developed and maintained by the Centers for Disease Control and Prevention (CDC).

The distribution of information on the health of the community is a core function and essential service of public health. The California Department of Public Health (CDPH) strongly supports the goals of public reporting on HAIs including the production and distribution of quality data that are valid, fair to hospitals, and useful to the public. Bearing in mind important limitations, the public can use these data as a starting point to discuss patient safety and quality of care with their healthcare providers and to make more informed healthcare decisions. Hospitals and health care providers can also use these data to examine their patient safety practices and improve quality of care, as appropriate.

Multidrug-Resistant Organisms (MDROs)

Methicillin-resistant *Staphylococcus aureus* (MRSA) and vancomycin-resistant *enterococcus* (VRE) are two of the most common multidrug-resistant germs, or organisms (MDROs) causing infections in hospital patients [2]. MDROs are microorganisms, mainly bacteria, that are resistant to one or more types of antibiotics. In the US, MDROs account for about 16% of all HAIs [3]. Although antibiotics are currently available for treatment of MRSA and VRE infections, resistance to each new drug has already emerged [1]. MDRO infections can also lead to increased lengths of hospital stay, higher hospital costs, and risk of death [2]. Hospitals can reduce these risks by preventing transmission (passing the organisms from patient to patient) and also by preventing infection in patients who have already acquired an MDRO. These measures should be an important priority in all hospitals.

MRSA

Staphylococcus aureus, also referred to as "staph," are bacteria, a type of germ commonly found on the skin or in the nose of people. Approximately 25% to 30% of people have the bacteria present, but not causing infection (this is called colonization). Some staph bacteria are resistant to antibiotics. MRSA is a type of staph that is resistant to a class of antibiotics related to penicillin-type drugs. About 1% of people are colonized with MRSA. People receiving certain types of healthcare, such as dialysis, or living in nursing homes, are at increased risk of being colonized with MRSA. A somewhat different type of MRSA causes infection in the community. For more information about both types of MRSA, please visit the CDPH HAI Program web page

at: http://www.cdph.ca.gov/programs/hai/Pages/MRSAMethicillin-Resistant Staphylococcusaureus.aspx.

VRE

Enterococci are bacteria that live in the human intestines. All humans are colonized with *enterococci*. Occasionally, enterococci can cause an infection of the urinary tract, bloodstream, or skin wounds. This usually happens to people with previous medical problems. Because enterococci are normally resistant to many antibiotics, a powerful drug called vancomycin is often used to treat those infections. Some enterococci are no longer killed by vancomycin and are known as vancomycin-resistant enterococci (VRE). These germs are often resistant to many antibiotics in addition to vancomycin. Most VRE infections occur in hospitals; patients with weakened immune function, such as from cancer chemotherapeutic medications, are at particular risk. For more information about VRE, please visit the CDPH HAI Program web page at: http://www.cdph.ca.gov/programs/hai/Pages/Vancomycin-resistantEnterococci(VRE).aspx

Bloodstream Infection

A bloodstream infection (BSI) occurs when a patient has bacteria or other germs detected in the blood along with signs of being ill, such as fever. This is considered a serious healthcare event [4]. For this report, a BSI is defined as a positive blood test without any additional information. As such, BSIs may be primary (without another site of infection), or secondary (coming from another site, such as pneumonia or urinary tract infection).

Monitoring MDRO Infections

California Health and Safety Code Section 1288.55 (a)(1) requires general acute care hospitals to report to the CDPH all cases of health-care-associated MRSA and VRE BSI, and the number of inpatient days. It requires the department to post on its web site the incidence rate of these infections.

The number of MRSA or VRE BSI in relation to the number of hospital patients, or incidence rate, is a recommended method to monitor MDRO infections in hospitals. It provides an estimate of the extent of the most serious MDRO infections at a hospital, and can be a representation of the extent of all MRSA infections [5]. Monitoring BSIs is more straightforward than monitoring other types of infections because identifying an infection is related primarily to whether the blood culture is positive or not. Hospitals routinely draw blood samples for culture in response to fever, so the chance of missing the diagnosis in a patient with a fever is minimal. Positive blood culture results are simple to identify and usually mean there is an infection, which is not necessarily true when testing other body fluids, such as urine. Finally, following MRSA and VRE BSI rates over time can be a reliable method to evaluate measures to prevent all MRSA and VRE infections, as studies have shown BSI rates decrease when hospitals with high rates of these infections use certain interventions [5].

The NHSN uses a method of monitoring BSIs called the Laboratory-Identified (LabID) Event module. This method requires the hospital to report blood culture or test results, such as polymerase chain reaction (PCR), and the day the patient was admitted to the hospital. The result is identified as community-onset (the infection occurred before the patient entered the hospital) or hospital-onset (the infection occurred after the patient entered the hospital) based on the timing of the result. Further details on the method are provided below in Methods, and further information on its advantages and disadvantages is in Discussion.

Hospital Onset of Infections

An infection with an MDRO that has its onset in the hospital does not mean that the MDRO itself (the MRSA or VRE bacteria in this case) was necessarily acquired (picked up) in this hospital. As mentioned above, a person may be colonized with MRSA and VRE; that is, the bacteria are present in the body without causing an infection. MRSA and VRE can be carried by a person for a year or more, and can cause an infection at any time.

Risk Adjustment/Stratification

Rates of infection can be risk adjusted, or risk stratified, to account for differences in the types of patients in different hospitals and allow for comparisons that are fairer. Risk adjustment means adjusting the rate for each hospital based on information on all patients in the hospitals, whether they have infections or not. The rates in this report are not risk adjusted, as there are no such methods available for MRSA and VRE BSI at this time. Major teaching and long-term acute care hospitals tend to have higher rates of BSIs, possibly due to higher risk patients, while pediatric hospitals have lower rates. Consequently, this report shows rates for these hospitals separately, an adjustment method called stratification. However, comparisons between hospitals within these groups (strata) should still be made with caution given that adjusting for different patient populations among the hospitals within these groups cannot be performed. Thus, differences in rates can represent differences in patient populations or differences in infection and transmission prevention practices. Comparisons must also assume that all laboratory and patient day data have been entered into NHSN accurately and correctly according to NHSN protocols. Misclassification of cases could result in a falsely lower or higher rate.

METHODS

California acute care hospitals

We identified 375 licensed general acute care hospitals representing 427 physical campuses with active acute care beds that operated continuously (for the full 12 months) during the reporting period. Of these, 44 licensed hospitals had more than one

campus associated with its license. We defined a multi-campus reporting facility as a licensee that reported HAI data combined for two or more jointly operated general acute care campuses (37 licenses comprising 81 campuses). We defined a single-campus reporting facility as an individual general acute care campus whose license included: (a) only one general acute care campus (331 licenses comprising 331 acute care campuses) or (b) more than one jointly-operated general acute care campus each of which reported infection information separately (7 licenses representing 15 campuses). In total, there were 383 reporting entities, hereafter referred to as hospitals. We referred to multi-campus hospitals by the business name of the licensee in CDPH Licensing and Certification (L&C) records except for the licenses involving University of California hospitals, which are described as such.

The Centers for Medicare & Medicaid Services (CMS) defines a long-term acute care (LTAC) hospital as a licensed general acute care hospital providing care for patients with medically complex conditions requiring an average length of stay for all patients of greater than 25 days [6]. California LTAC hospitals were identified through CMS and assessments by HAI Program staff. The most common diagnosis in LTACs is a respiratory condition requiring mechanical ventilation; most of those patients are admitted directly from an acute care hospital intensive care unit.

Data sources

The primary sources of data for this report are those submitted by hospitals using NHSN. Beginning April 1, 2010, all California licensed general acute care hospitals were required to report MRSA and VRE BSIs using the NHSN MDRO LabID module facility-wide [6] and provide CDPH electronic permission to access this data. On October 5, 2011, we accessed from NHSN MRSA and VRE BSI data reported for the period April 1, 2010 through March 31, 2011. These data included NHSN-produced summary files listing all MRSA and VRE BSIs reported by California hospitals (MRSA and VRE BSIs event files) and NHSN-produced files containing counts of MRSA and VRE BSIs, patient days and MRSA and VRE BSI rates per 1000 patient days for each hospital (MRSA and VRE BSI rate files).

Definitions

CDPH required hospitals to comply with NSHN surveillance and reporting protocols and NHSN standardized definitions [7-9], including the definitions used in this report:

MRSA: Includes *S. aureus* cultured from any specimen that tests oxacillin-resistant by standard susceptibility testing methods, or by a positive result from molecular testing for mecA and PBP2a. These methods may also include positive results of specimens tested by any other Food and Drug Administration (FDA) approved polymerase chain reaction (PCR) test for MRSA.

VRE: Any *Enterococcus* spp. (regardless of whether identified to the species level), that is resistant to vancomycin.

Unique Blood Source: A MDRO isolate from blood in a patient with no prior positive blood culture for the same MDRO in less than or equal to 2 weeks, even across calendar months. The 2-week interval is because some patients may have positive tests from the same infection for up to two weeks.

Laboratory-Identified (LabID) Event: All Unique Blood Source isolates for MRSA and VRE.

Community-Onset (CO): LabID Event specimen collected as an outpatient or an inpatient less than or equal to 3 days after admission to the facility (i.e., days 1, 2, or 3 of admission).

Hospital-Onset (HO): LabID Event specimen collected more than 3 days after admission to the facility (i.e., on or after day 4).

Major teaching hospital: Hospital that is an important part of the teaching program of a medical school and the majority of medical students rotate through multiple clinical services [7]. Before extracting the data for this report we asked each California hospital enrolled in NHSN self-identified as teaching to review their classification in regard to the NHSN definitions and to change their classification if appropriate. Each classification was reviewed and confirmed as appropriate according to NHSN definitions by HAI Program staff.

Pediatric hospital: Hospital defined by CDPH L&C Program as a stand-alone children's hospital.

Long-term Acute Care (LTAC): Hospital as defined by CMS as a licensed general acute care hospital providing care for patients with medically complex conditions requiring an average length of stay for all patients of greater than 25 days. California LTAC hospitals were identified through CMS and assessments by HAI Program staff.

Community hospital: Hospital not classified as major teaching, LTAC, or pediatric.

Reporting Period: April 1, 2010, through March 31, 2011.

Quality assurance and control

Hospital personnel were solely responsible for the quality and completeness of their MRSA and VRE BSI data. CDPH assisted hospitals in identifying potential systematic data errors by reviewing hospital-specific NHSN data and notifying hospitals of potential discrepancies. We distributed quality assurance and control reports, which identified missing, incomplete, or potentially aberrant data for the reporting period, to hospitals in March and May 2011. We strongly encouraged hospitals to investigate and resolve these data issues, as appropriate. CDPH made available to hospitals the assistance of regional infection prevention staff to help resolve NHSN enrollment or reporting issues. Additionally, in October 2011, we emailed all hospitals with missing data (both

numerator and denominator) in the NHSN, and indicated the number of months for which we had no data. We encouraged hospitals to do a final review to make corrections and enter missing data before the final data download on October 24, 2011. Facilities made all corrections in NHSN. CDPH staff did not independently validate the hospital data in this report.

Data presentation, organization and statistical analyses

Numbers of MRSA and VRE BSIs, patient days, unadjusted MRSA and VRE BSI incidence rates, and 95% confidence intervals, stratified by hospital type, are the primary measures reported. We stratified hospitals according to status as a major teaching, LTAC, or pediatric hospital, after examination of pooled mean incidence rates using this stratification. We categorized the four pediatric hospitals that are also major teaching hospitals into the pediatric hospital category only as their incidence rates were consistent with that category. Those hospitals not classified as major teaching, LTAC, or pediatric were termed community hospitals. This category includes specialty hospitals such as surgery and oncology (cancer treatment) hospitals.

There are no accepted methods for risk adjusting or stratifying MRSA and VRE BSI incidence rates and no published national benchmarks. The method of stratification used in this report has not been used elsewhere for evaluating MRSA and VRE BSI incidence rates. The classification by type of hospital may not account for all the differences in patient populations in regard to risk of BSIs.

We performed the following calculations on data submitted to NHSN during the reporting period. The numerators for the rates were all LabID Events categorized as defined above. The denominators for the rates were total inpatient days. The equation for the rate calculations are shown below:

Incidence Density Rate for hospital onset MRSA and VRE BSIs [8]:

$$\frac{\text{Number of Unique Blood Source Hospital Onset (HO) LabID Events}}{\text{Total inpatient days}} \times 10{,}000$$

We used 10,000 as the multiplier rather than 1,000 to yield whole numbers or large fractions because MRSA and BSI rates are low. Also, total patient days were most commonly in the tens of thousands. For this report, incidence density rate will be referred to as incidence rate. Hospitals summed and entered into NHSN the denominator data (patient days and admissions) for all inpatient days. We calculated HO incidence rates for every hospital that reported data in NHSN for at least ten months during the reporting period.

For each rate we calculated exact 95% confidence intervals using the Poisson distribution [10]. We calculated the pooled mean for each rate by dividing the sum of all BSI cases by the sum of all inpatient days. The pooled mean was calculated for each

BSI by dividing the sum of all Unique Blood Source HO LabID Events by the sum of the number of all patient days x 10,000.

A confidence interval is a range of values used to quantify the precision of a rate that is associated with random variation (it provides no information about systematic errors or 'bias'). The wider the interval, the greater the uncertainty associated with the rate. The width of the confidence interval is, in part, related to the reported numbers of cases and patient days. Smaller hospitals with fewer infections and patient days have the least precision associated with their rates and the widest confidence intervals.

We used confidence intervals to compare hospital-specific rates with the pooled mean for each hospital type. This assumes that the true value is equal to the benchmark and is similar to performing an exact single-sample test. A hospital-specific BSI rate was significantly higher than the pooled mean if the hospital's entire 95% confidence interval was higher than the mean. The BSI rate was significantly lower than the pooled mean if the hospital's entire confidence interval was lower than the mean. The BSI rate was no different than the pooled mean if the hospital's confidence interval contained the mean. Confidence intervals for the stratified rates (classified by type of hospital) in this report may be used, *with caution*, to make comparisons between hospitals [11]. This method is useful as a quick but potentially inconclusive guide. Its interpretation differs from those made when comparing a hospital rate to a benchmark such as a pooled mean for the hospital group. If two hospitals' confidence intervals do not overlap, the rates are significantly different from one another.

For a measure of the severity of illness in hospital patient populations, we utilized campus-specific case mix indices (CMI), when available, published by the California Office of Statewide Health Planning and Development (OSHPD) for fiscal year 2008/2009 (http://www.oshpd.ca.gov/HID/Products/PatDischargeData/CaseMixIndex/default.asp), and rounded indices to two decimal places. Although the CMI was derived using weights based on resource consumption by Medicare patients, OSHPD applied the CMI calculation to all patient discharge data reported by California hospitals. The CMI was available only for individual hospital campuses rather than for consolidated licensed hospitals, as a whole. The CMI provides a useful reference point when examining individual hospital BSI rates as it can indicate whether a hospital serves patients with higher or lower severity of illness. Severity of illness is one factor associated with a hospital having a higher or lower BSI rate when compared to the pooled mean. For example, a hospital caring for patients with higher severity of illness could be predicted to have higher rates of BSIs. It is important to note that the CMI is only one factor that may explain the difference between a hospital's BSI and the pooled mean. Additionally, CMI may not completely account for differences in severity of illness between hospital patient populations.

RESULTS

Among 383 reporting hospitals, 19 (5.0%) were identified as major teaching, 24 (6.3%) as LTAC, 11 (2.9%) as pediatric, and 329 (85.9%) as community hospitals. Of the 383,

361 (94.3%) reported between 10 and 12 months for both MRSA and VRE BSIs. All the rates presented in Tables 1-10 were calculated using data from hospitals reporting at least 10 months of data. Of the 361 hospitals with at least 10 months of data, 355 (97.5%) reported all 12 months. MRSA and VRE BSI data for 22 hospitals reporting less than 10 months are shown in Table 11. Of these, 3 reported no data and 19 reported between 2 and 9 months; 18 of the 22 were community hospitals; 3 were LTAC and 1 was a pediatric hospital. Given the extent of unreported data, an incidence rate was not generated for these hospitals. Among these hospitals there were 4 MRSA and 4 VRE BSIs.

BSI Incidence Rates by Hospital Category

MRSA

The MRSA BSI incidence rates by hospital category are shown in Table 1. Overall, among 361 reporting hospitals reporting at least 10 months of data, there were 908 MRSA BSIs during 16,207,201 patient days. This is a pooled mean incidence rate of 0.6 MRSA BSI per 10,000 patient days, with a median of 0.2 MRSA BSI per 10,000 patient days. Of the 361 hospitals, 155 (42.9%) reported no MRSA BSI during the reporting period.

Major teaching hospitals (1.0 per 10,000 patient days) and LTACs (1.1 per 10,000 patient days) had higher incidence rates of MRSA BSI than pediatric hospitals (0.1 per 10,000 patient days) and community hospitals (0.5 per 10,000 patient days). LTACs had the highest mean case mix index (2.42), followed by major teaching hospitals (1.40), pediatric (1.39), and community reporting hospitals (1.19). The overall mean CMI was 1.27.

VRE

The VRE BSI incidence rates by hospital category are shown in Table 2. Overall, among 361 reporting hospitals reporting at least 10 months of data, there were 788 VRE BSIs during 16,207,201 patient days for a pooled mean incidence rate of 0.5 VRE BSI per 10,000 patient days with a median of 0 MRSA BSI per 10,000 patient days. Of the 361 hospitals, 194 (53.7%) reported no VRE BSI during the reporting period.

Major teaching hospitals and LTACs (each at 1.2 per 10,000 patient days) had higher incidence rates of VRE BSI than pediatric hospitals (0.2 per 10,000 patient days) and community hospitals (0.3 per 10,000 patient days).

Hospital-specific BSI Rates

MRSA

The hospital-specific HO MRSA BSI incidence rates are shown in Table 3 (major teaching), Table 4 (LTAC), Table 5 (pediatric) and Table 6 (community). The incidence

rates in 19 major teaching hospitals (Table 3) ranged from 0 to 2.2 MRSA BSI per 10,000 patient days with a pooled mean of 1.0. Of these 19 hospitals, 1 (5.3%) had a rate significantly above the pooled mean, while 2 had rates below the pooled mean, including 1 (5.3%) with no reported MRSA BSIs.

The MRSA BSI incidence rates in 21 LTAC hospitals (Table 4) ranged from 0 to 4.1 MRSA BSI per 10,000 patient days with a pooled mean of 1.1. Of the 21 hospitals, 1 (4.8%) had a rate significantly above, and 1 had a rate below, the pooled mean. Of the 21 hospitals, 7 (33.3%) reported no MRSA BSIs.

The MRSA BSI incidence rates in 10 pediatric hospitals (Table 5) ranged from 0 to 0.3 MRSA BSI per 10,000 patient days with a pooled mean of 0.1. Of the 10 hospitals, none had a rate significantly above or below the pooled mean, while 6 (60%) reported no MRSA BSIs.

The MRSA BSI incidence rates in 311 community hospitals (Table 6) ranged from 0 to 4.8 MRSA BSI per 10,000 patient days with a pooled mean of 0.5. Of the 311, 15 (4.8%) had rates significantly above the pooled mean, while 9 (2.9%) hospitals had rates below the pooled mean; 142 (45.7%) reported no MRSA BSIs.

VRE

The hospital-specific VRE BSI incidence rates are shown in Table 7 (major teaching), Table 8 (LTAC), Table 9 (pediatric) and Table 10 (community). The incidence rates in 19 major teaching hospitals (Table 7) ranged from 0.3 to 2.8 VRE BSI per 10,000 patient days with a pooled mean of 1.2. Of these 19, 3 (15.8%) had rates significantly above the pooled mean, while 3 (15.8%) hospitals had rates below the pooled mean, including one which also had an MRSA BSI below the pooled mean. All 19 reported some VRE BSIs.

The VRE BSI incidence rates in 21 LTAC hospitals (Table 8) ranged from 0 to 4.1 VRE BSI per 10,000 patient days with a pooled mean of 1.2. Of the 21, 1 (4.8%) had a rate significantly above the pooled mean, while 2 (9.5%) had rates below the pooled mean, including one which also had an MRSA BSI below the pooled mean. Of the 21, 8 (38.1%) reported no VRE BSIs.

The VRE BSI incidence rates in 10 pediatric hospitals (Table 9) ranged from 0 to 0.6 VRE BSI per 10,000 patient days with a pooled mean of 0.2. None of the hospitals were different than the pooled mean; 6 (60%) reported no VRE BSIs.

The VRE BSI incidence rates in 311 community hospitals (Table 10) ranged from 0 to 5.5VRE BSI per 10,000 patient days with a pooled mean of 0.3. Of the 311, 12 (3.9%) had a rate significantly above the pooled mean, while none had rates below the pooled mean. Of the 311 hospitals, 180 (57.9%) reported no VRE BSI.

Relationship Between Significantly Higher or Lower BSI Rates and CMIs

The relationship between CMI MSRA BSI rate above or below the mean was inconsistent. Both major teaching hospitals with rates significantly below the mean had CMIs (1.07, 1.26) well below the mean CMI for those hospitals (1.40). Only one CMI was available for LTACs. The CMIs of the 15 community hospitals with significantly higher than average MRSA BSI rates ranged from 1.04 to 1.64, and averaged 1.31 compared to 1.19 for all 311 community hospitals. Of these 15, 8 were above the average CMI. The CMIs of the 9 community hospitals with significantly lower rates of MRSA BSIs ranged from 0.70 to 1.56 and averaged 1.28, similar to that of those with higher rates and also above the mean CMI for community hospitals. Only 1 of 9 had a CMI below the mean CMI.

We observed a more suggestive relationship between CMIs and the likelihood of having a VRE BSI rate significantly above or below the mean. The CMIs for the 3 major teaching hospitals with rates above the mean were all above the average CMI and averaged 1.91 compared to 1.40. The CMIs for 2 of the 3 major teaching hospitals with rates significantly below the mean were below the mean CMI and averaged 1.35. The LTAC with the highest rate of VRE BSI also had the highest CMI, but the 2 LTACs with rates below the mean also had CMIs above the mean CMI. The CMIs of the 12 community hospitals with higher than average VRE BSI rates ranged from 1.04 to 2.10 and averaged 1.37 compared to 1.19 for all 311 community hospitals. Eight of twelve were above the average CMI. No community hospital had a VRE BSI rate below the pooled mean.

Four hospitals had rates for both MRSA and VRE BSI above the pooled means for the community hospital category. Three of these were at least two-fold higher than the pooled mean for both BSIs. Two of these had CMIs above the mean for community hospitals, both of which had rates at least two-fold higher than the mean, while two were below.

DISCUSSION

This is the first report of MRSA and VRE BSI incidence rates among California acute care hospitals using NHSN data. According to NHSN data, 43.6% and 53.6% of hospitals reported no MRSA and VRE BSIs, respectively. As this is the first public report of MRSA and VRE BSIs by any U.S. agency, there are no available national or state benchmarks for comparison. The state pooled mean rates for MRSA and VRE BSIs are each less than one-tenth that for *Clostridium difficile* (CDI) infections and the total number MRSA and VRE BSIs reported (1,704) is less than half that reported for central line associated BSI (3,519) in the same period. The full text of this report is located on the HAI Program website at: (http://www.cdph.ca.gov/programs/hai/Pages/default.aspx).

Major teaching and LTAC hospitals had higher rates of MRSA and VRE BSIs than community hospitals, likely in part the result of differences in severity of illness in

patients in these hospitals, as reflected by their different CMIs. Pediatric hospitals had lower rates of MRSA and VRE BSIs than all three other categories of hospitals. Their CMIs were similar to major teaching hospitals and higher than community hospitals. Consequently, their lower BSI rates presumably result from factors specific to pediatric patients other than the measure of severity of illness reflected in the CMI.

A number of hospitals had significantly higher or lower rates when compared to other hospitals in their respective categories. Differences in the severity of illness in their patient populations, as measured in this report through the CMI, may explain some, but not all, of these differences. It is possible that CMI does not adequately represent the severity of illness in all hospitals. The risk of BSIs may also be related to factors other than severity of illness, including differences in infection prevention efforts.

There are no reports of MRSA or VRE BSI incidence rates from NHSN or comparable data for comparison with this report. A 34% decrease in the incidence of hospital-onset MRSA BSIs was recently reported in US hospitals (including 3 San Francisco Bay area counties) from 2005 through 2008. [12]. These findings complement those from several smaller studies of infection prevention interventions, which demonstrate decreases in MRSA infections at individual or small collections of hospitals, and may be attributed to the national focus on prevention of MDRO transmission and infection [12]. Therefore, it is possible that rates of MRSA BSIs have been decreasing in California prior to this reporting period. Future CDPH reports will determine if the incidence of these BSIs is decreasing in California hospitals.

The quality of the data and the comparability of the rates in this report are in sharp contrast to the 2010 CDPH BSI report [1], which used quarterly summary reporting by hospitals, on paper forms, with no definitions for BSI cases provided. Since case definitions and case finding methods varied across the two reporting periods, the rates in the two reports should not be compared. Use of the NHSN LabID Event reporting module provided relative assurance of uniform case findings and case definitions, assuming that blood culture or test results were entered completely and accurately (including date of test), as required by NHSN protocol. If these two sets of data are entered accurately and completely, the accuracy of the incidence rate depends only on the accuracy of the number of patient days entered each month (or averaged over the course of the reporting period). It is possible that the accuracy of patient days is variable, as those responsible for NHSN reporting may have difficulty obtaining an accurate estimate of patient days in a timely fashion. With these caveats, the hospital-specific incidence rates for MRSA and VRE BSI reported here can be compared within facility categories, keeping in mind that differences in patient populations may still exist within these categories. LabID Events include all BSI, primary and secondary. It is, therefore, possible that some BSI detected after the third day of admission (and counted as hospital onset infections) are secondary to other infections that had their onset prior to admission to the hospital. As a result, these BSIs are unrelated to care during the current admission. The proportion of these infections represented in hospital-onset BSIs in this report is unknown, and whether the proportion might vary among hospitals is also unknown.

The incidence rates generated through NHSN LabID Event reporting has an advantage over clinical surveillance by eliminating the need to detect and classify cases through review of patient medical records, which is labor intensive and subject to variability in clinical judgment. However, it may represent an overestimate of rates by including some positive blood tests that are actually secondary to infections at other sites, or an underestimate by inappropriate exclusion of test results.

Dividing by the number of patient days (incidence density) rather than dividing by the number of admissions (incidence) is also important because the risk of a hospital-acquired infection increases the longer a patient stays in the hospital. Incidence density accounts for length of patient stay (i.e., all days during which patients are at risk for MDRO infection). Eliminating patient days for patients who have been in the hospital for 3 or fewer days would increase the accuracy of the measure even more. However, because it is time-consuming and has not been adequately studied, it is not currently recommended [5]. It should be noted that, as currently used, incidence density rate may underestimate the incidence of infection in hospitals with short lengths of stay. The average length of stay in California general acute care hospitals other than major teaching, LTAC, or pediatric is just 4.2 days. In major teaching hospitals, it is 6.0 days; in pediatric, 5.7 days, and LTACs, 28.9 days. Adjusting for length of stay might narrow the differences in rates between major teaching and LTAC hospitals and community hospitals.

CONCLUSIONS

This is the first report of MRSA and VRE BSI incidence rates among California acute care hospitals using NHSN data. The previous report [1] included quarterly summary data reported via paper forms, which provided no definitions for the BSIs. As such, methods used by hospitals to identify BSIs may have varied between the two reporting periods. Therefore, rates reported by individual hospitals in the two reports should not be compared. In contrast, the use of the NHSN laboratory reporting method for this report provided for the use of standard definitions for BSIs and allows comparisons according to types of hospitals and, with caution, between hospitals with these types.

A number of hospitals had significantly higher or lower rates when compared to other hospitals in their respective categories. Differences in the severity of illness in their patient populations, as measured in this report through the CMI, may explain some but not all of these differences. It is possible that CMI does not adequately represent the severity of illness in all hospitals. The risk of BSIs may also be related to factors other than severity of illness, including differences in infection prevention efforts.

There is no historical data or national or state benchmarks for comparison with the rates in this report. However, the report findings indicate that further improvement might be possible in major teaching, LTAC, and some other hospitals, and these may be reflected in future CDPH reports.

In follow-up to this report, CDPH will take the following steps:

- Encourage hospitals to continue reporting complete MRSA and VRE BSI LabID Event data into NHSN.
- Send quality control reports to hospitals with data currently in NHSN. The reports will identify missing data, including numerators and denominators, so that hospitals may correct data entry errors prior to the next report.
- Participate, as appropriate, in a working group with state and public health stakeholders to identify appropriate risk factors for adjusting MRSA and VRE BSI data.

All hospitals should review these data and consider the following:

- Examine their MRSA and VRE BSI rates relative to hospitals in their facility category, and consider taking measures to address MRSA and VRE prevention using the CDC [2], Society for Healthcare Epidemiology of America /Infectious Disease Society of America [14], and/or Association for Professionals in Infection Control and Epidemiology guidelines [15] for prevention of MRSA.
- Review the participation alerts available in NHSN to identify and correct potential data entry errors, including incomplete and missing data entry.
- Use the NHSN analysis tools to review data and verify timeliness and accuracy.
- Examine the NHSN-generated rate tables to ensure appropriate categorization of all MRSA and VRE BSI LabID events.
- Review CDPH's quarterly quality control reports to confirm that CDPH has correct and complete data and to identify additional data errors.

The public and consumers should consider taking the following steps:

- Review the information presented including the limitations and context for results.
- Ask your healthcare provider about the actions your hospital is taking to ensure patient safety, including MRSA and VRE prevention measures.
- Ask your healthcare provider about the actions you can take to ensure your safety in the hospital, including protecting against MRSA and VRE.
- Speak up if you don't understand or have a question. Clear communication between you and your healthcare provider is one of the first steps you can take towards ensuring your own safety.

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TABLE 1. Incidence rates of hospital-onset methicillin-resistant *Staphylococcus aureus* bloodstream infections reported by California acute care hospitals, restricted to hospitals that reported at least ten months of data, April 1, 2010 through March 31, 2011 (inclusive).

Facility Category	Number of Hospitals	Cases	Patient Days	Pooled Mean Rate	Mean Case Mix Index*
Major Teaching	19	257	2,665,759	1.0	1.40
Long-term Acute Care	21	47	434,363	1.1	2.42
Pediatric	10	6	568,924	0.1	1.39
Community**	311	598	12,538,155	0.5	1.19
All	361	908	16,207,201	0.6	1.27

* Mean of all hospitals in each category case mix indexes

** Other than major teaching, long-term acute care, or pediatric

Notes: Rate per 10,000 patient days

Source: Methicillin-Resistant *Staphylococcus Aureus* and Vancomycin-Resistant *Enterococcus* Bloodstream Infections In California General Acute Care Hospitals, April 2010 Through March 2011. California Department of Public Health

Table 2. Incidence rates of hospital-onset vancomycin-resistant Enterococci bloodstream infections reported by California acute care hospitals, restricted to hospitals that reported at least ten months of data, April 1, 2010 through March 31, 2011 (inclusive).

Facility Category	Number of Hospitals	Cases	Patient Days	Pooled Mean Rate	Mean Case Mix Index*
Major Teaching	19	307	2,665,759	1.2	1.40
Long-term Acute Care	21	51	434,363	1.2	2.42
Pediatric	10	9	568,924	0.2	1.39
Community**	311	421	12,538,155	0.3	1.19
All	361	788	16,207,201	0.5	1.27

* Mean of all hospitals in each category case mix indexes

** Other than major teaching, long-term acute care, or pediatric

Notes: Rate per 10,000 patient days

Source: Methicillin-Resistant *Staphylococcus Aureus* and Vancomycin-Resistant *Enterococcus* Bloodstream Infections In California General Acute Care Hospitals, April 2010 Through March 2011. California Department of Public Health

Table 3. Incidence rates of hospital-onset methicillin-resistant Staphylococcus aureus bloodstream infections reported by California major teaching acute care facilities, April 1, 2010 through March 31, 2011 (inclusive)*.

Hospital licensee and/or campus name	Cases	Patient Days	Incidence Rate	95% Confidence Interval	Compared To Pooled Mean**	Case Mix Index
STATE OF CALIFORNIA POOLED DATA	**257**	**2665759**	**1.0**			**1.40*** **
ARROWHEAD RGN MED CTR, COLTON	20	90508	2.2	(1.4, 3.4)	H	1.04
CEDARS-SINAI MED CTR, LOS ANGELES	28	307193	0.9	(0.6, 1.3)	N	1.46
COMMUNITY REGIONAL MED CTR, FRESNO	24	176656	1.4	(0.9, 2.0)	N	1.27
LAC/HARBOR-UCLA MED CTR, TORRANCE	13	110158	1.2	(0.6, 2.0)	N	1.32
LAC+USC MED CTR, LOS ANGELES	16	182057	0.9	(0.5, 1.4)	N	1.24
† LOMA LINDA UNIVERSITY MED CTR	23	210278	1.1	(0.7, 1.6)	N	
LOMA LINDA UNIV HEART & SURGICAL HOSP, REDLANDS						
LOMA LINDA UNIV MED CTR EAST HOSP, LOMA LINDA						
LOMA LINDA UNIV MED CTR, LOMA LINDA						1.62
LOS ANGELES CO OLIVE VIEW-UCLA MED CTR	0	70054	0.0	(0.0, 0.4)	L	1.07
RIVERSIDE COUNTY REGIONAL MED CTR	8	93404	0.9	(0.4, 1.7)	N	1.04
RONALD REAGAN UCLA MED CTR, LOS ANGELES	16	149700	1.1	(0.6, 1.7)	N	1.95
SAN FRANCISCO GENERAL HOSP	12	98479	1.2	(0.6, 2.1)	N	1.18
SANTA CLARA VALLEY MED CTR, SAN JOSE	13	135303	1.0	(0.5, 1.6)	N	1.11
SANTA MONICA, UCLA MED CTR AND ORTHOPAEDIC	5	86270	0.6	(0.2, 1.4)	N	1.29
† SCRIPPS HEALTH	7	153941	0.5	(0.2, 0.9)	L	
SCRIPPS MERCY HOSP						1.26
SCRIPPS MERCY HOSP CHULA VISTA						
STANFORD HOSP, STANFORD	11	136276	0.8	(0.4, 1.4)	N	1.96

Table 3. Incidence rates of hospital-onset methicillin-resistant Staphylococcus aureus bloodstream infections reported by California major teaching acute care facilities, April 1, 2010 through March 31, 2011 (inclusive)*.

Hospital licensee and/or campus name	Cases	Patient Days	Incidence Rate	95% Confidence Interval	Compared To Pooled Mean**	Case Mix Index
UNIVERSITY OF CALIFORNIA DAVIS MED CTR, SACRAMENTO	19	167417	1.1	(0.7, 1.8)	N	1.60***
UNIVERSITY OF CALIFORNIA IRVINE MED CTR, ORANGE	8	103090	0.8	(0.5,1.5)	N	1.53
† UNIVERSITY OF CALIFORNIA, SAN DIEGO	12	134670	0.9	(0.5, 1.6)	N	
UC, SAN DIEGO MED CTR						1.58
UCSD-LA JOLLA, JOHN M.& SALLY B. THORNTON HOSP						
† UNIVERSITY OF CALIFORNIA, SAN FRANCISCO	16	184334	0.9	(0.5, 1.4)	N	
UCSF MED CTR, SAN FRANCISCO						1.85
UCSF MED CTR AT MOUNT ZION, SAN FRANCISCO						
† UNIVERSITY OF SOUTHERN CALIFORNIA	6	75971	0.8	(0.3, 1.7)	N	
USC UNIVERSITY HOSP, LOS ANGELES						2.35
USC KENNETH NORRIS JR. CANCER HOSPITAL						1.75

*All hospitals reported 12 months of data.

**Incidence rate for hospital compared to pooled mean using 95% confidence intervals: N = no different, H = significantly higher, L = significantly lower than pooled mean.

*** Mean of all hospitals case mix indices

† Hospital reported infection data aggregated over all acute care campuses

Notes: Rate per 10,000 patient days; 95% confidence interval calculated based on exact Poisson distribution; case mix index was available and listed for most but not all acute care campuses

Source: Methicillin-Resistant *Staphylococcus aureus* and Vancomycin-Resistant *Enterococcus* Bloodstream Infections In California General Acute Care Hospitals, April 2010 Through March 2011

Table 4. Incidence rates of hospital-onset methicillin-resistant *Staphylococcus aureus* bloodstream infections reported by California long-term acute care hospitals, restricted to hospitals that reported at least ten months of data, April 1, 2010 through March 31, 2011 (inclusive).

Hospital licensee and/or campus name	Cases	Patient Days	Incidence Rate	95% Confidence Interval	Compared To Pooled Mean**	Case Mix Index
STATE OF CALIFORNIA POOLED DATA	**47**	**434363**	**1.1**			**2.42*** **
BALLARD REHAB HOSP, SAN BERNARDINO	0	14606	0.0	(0.0, 2.1)	N	1.09
KENTFIELD REHAB & SPECIALTY HOSP, KENTFIELD	0	33429	0.0	(0.0, 0.9)	L	2.45
KINDRED HOSP, BREA	2	14833	1.4	(0.2, 4.9)	N	2.07
KINDRED HOSP, LOS ANGELES	1	27186	0.4	(0.0, 2.0)	N	3.08
KINDRED HOSP, ONTARIO	3	28972	1.0	(0.2, 3.0)	N	2.92
KINDRED HOSP OF RIVERSIDE. PERRIS	2	12323	1.6	(0.2, 5.9)	N	3.35
KINDRED HOSP, SACRAMENTO, FOLSOM	0	11954	0.0	(0.0, 2.5)	N	2.95
KINDRED HOSP, SAN DIEGO	0	17543	0.0	(0.0, 1.7)	N	2.42
KINDRED HOSP, SAN FRANCISCO BAY AREA	4	17310	2.3	(0.6, 5.9)	N	3.89
KINDRED HOSP WESTMINSTER	7	34930	2.0	(0.8, 4.1)	N	2.85
MONROVIA MEMORIAL HOSP	1	9112	1.1	(0.0, 6.1)	N	2.52
NEWPORT SPECIALTY HOSP, TUSTIN	0	9235	0.0	(0.0, 3.2)	N	2.09
NORTHERN CA REHAB HOSP, REDDING	5	17198	2.9	(0.9, 6.8)	N	1.72
PROMISE HOSP OF EAST LA-EAST L.A CAMPUS	0	9763	0.0	(0.0, 3.1)	N	2.72
PROMISE HOSP OF EAST LA-SUBURBAN CAMPUS	2	41624	0.5	(0.1, 1.7)	N	
‡ SOUTHERN CALIFORNIA SPECIALTY CARE, INC			0.0			
KINDRED HOSP, LA MIRADA	6	24293	2.5	(0.9, 5.4)	N	2.32
KINDRED HOSP, SAN GABRIEL VALLEY, WEST COVINA	1	19760	0.5	(0.0, 2.8)	N	
KINDRED HOSP, SANTA ANA	6	14572	4.1	(1.5, 9.0)	H	
VIBRA HOSP OF SAN DIEGO, SAN DIEGO	4	28866	1.4	(0.4, 3.5)	N	2.11
VISTA HOSP OF SAN GABRIEL VALLEY, BALDWIN PARK	3	23512	1.3	(0.3, 3.7)	N	2.85
VISTA HOSP OF SOUTH BAY, GARDENA*	0	23342	0.0	(0.0, 1.3)	N	2.31

*Reported 11 months of data; all other hospitals reported 12 months of data.
**Incidence rate for hospital compared to pooled mean using 95% confidence intervals: N = no different, H = significantly higher, L = significantly lower than pooled mean.
*** Mean of all hospitals case mix indices
‡ Hospital reported infection data separately by acute care campus
Notes: Rate per 10,000 patient days; 95% confidence interval calculated based on exact Poisson distribution; case mix index was available and listed for most but not all acute care campuses

Source: Methicillin-Resistant *Staphylococcus aureus* and Vancomycin-Resistant *Enterococcus* Bloodstream Infections In California General Acute Care Hospitals, April 2010 Through March 2011

Table 5. Incidence rates of hospital-onset methicillin-resistant *Staphylococcus aureus* bloodstream infections reported by California pediatric acute care hospitals, restricted to hospitals that reported at least ten months of data, April 1, 2010 - March 31, 2011 (inclusive)*.

Hospital licensee and/or campus name	Cases	Patient Days	Incidence Rate	95% Confidence Intervals**	Case Mix Index
STATE OF CALIFORNIA POOLED DATA	**6**	**568924**	**0.1**		**1.39*** **
CHILDRENS HOSP AND RESEARCH CTR OAKLAND	0	61137	0.0	(0.0, 0.5)	1.24
CHILDREN'S HOSP AT MISSION, MISSION VIEJO	0	9141	0.0	(0.0, 3.3)	1.20
CHILDREN'S HOSP CENTRAL CALIFORNIA, MADERA	2	79391	0.3	(0.0, 0.9)	1.44
CHILDREN'S HOSP OF ORANGE COUNTY, ORANGE	2	58847	0.3	(0.0, 1.2)	1.31
CHILDRENS HOSP OF LOS ANGELES	1	88667	0.1	(0.0, 0.6)	1.78
EARL & LORAINE MILLER CHILDREN'S HOSP, LONG BEACH	0	88896	0.0	(0.0, 0.3)	0.88
HEALTHBRIDGE CHILDREN'S HOSP, ORANGE	0	2011	0.0	(0.0, 14.9)	1.09
LUCILE SALTER PACKARD CHILDREN'S HOSP STANFORD	1	90793	0.1	(0.0, 0.6)	1.37
RADY CHILDREN'S HOSP, SAN DIEGO	0	75812	0.0	(0.0, 0.4)	1.44
SHRINERS HOSPS FOR CHILDREN NORTH CA, SACRAMENTO	0	8522	0.0	(0.0, 3.5)	2.13

*All hospitals reported 12 months of data.

** Mean of all pediatric hospitals case mix indices

*** Mean of all hospitals case mix indices

Notes: No hospital had incidence rates significantly higher or lower than the State pooled mean. Rate per 10,000 patient days; 95% confidence interval calculated based on exact Poisson distribution; case mix index was available and listed for most but not all acute care campuses

Source: Methicillin-Resistant *Staphylococcus aureus* and Vancomycin-Resistant *Enterococcus* Bloodstream Infections In California General Acute Care Hospitals, April 2010 Through March 2011

Table 6. Incidence rates of hospital-onset methicillin-resistant *Staphylococcus aureus* bloodstream infections reported by California community hospitals, restricted to facilities that reported at least ten months of data, April 1, 2010 through March 31, 2011 (inclusive).

Hospital licensee and/or campus name	Cases	Patient Days	Incidence Rate	95% Confidence Interval	Compared To Pooled Mean***	Case Mix Index
STATE OF CALIFORNIA POOLED DATA	**598**	**12538155**	**0.5**			**1.19**[***]
† ADVENTIST HEALTH SYSTEMS	3	41491	0.7	(0.2, 2.1)	N	
ADVENTIST MED CTR, HANFORD						
SELMA COMMUNITY HOSP						
AHMC ANAHEIM REGIONAL MED CTR, ANAHEIM	1	56060	0.2	(0.0, 1.0)	N	1.28
† ALAMEDA COUNTY MED CTR	4	55605	0.7	(0.2, 1.8)	N	
ALAMEDA COUNTY MED CTR, OAKLAND						1.04
FAIRMONT CAMPUS, SAN LEANDRO						
ALAMEDA HOSP	1	10526	1.0	(0.0, 5.3)	N	1.35
ALHAMBRA HOSP MED CTR	0	22280	0.0	(0.0, 1.3)	N	1.44
† ALTA LOS ANGELES HOSPS, INC.	0	43397	0.0	(0.0, 0.7)	N	
LOS ANGELES COMMUNITY HOSP						0.99
NORWALK COMMUNITY HOSP						1.37
† ALVARADO HOSP, LLC	3	39914	0.8	(0.2, 2.2)	N	
ALVARADO HOSP CAMPUS #1, SAN DIEGO						1.58
ALVARADO HOSP CAMPUS #2, SAN DIEGO						
ANAHEIM GENERAL HOSP	0	2608	0.0	(0.0, 11.5)	N	1.14
ANTELOPE VALLEY HOSP, LANCASTER	6	116741	0.5	(0.2, 1.1)	N	1.06
ARROYO GRANDE COMMUNITY HOSP	1	10013	1.0	(0.0, 5.6)	N	1.38
BAKERSFIELD HEART HOSP	0	15221	0.0	(0.0, 2.0)	N	1.84
BAKERSFIELD MEMORIAL HOSP	8	77378	1.0	(0.4, 2.0)	N	1.17
BANNER LASSEN MED CTR, SUSANVILLE	0	3739	0.0	(0.0, 8.0)	N	0.79
BARSTOW COMMUNITY HOSP	0	7845	0.0	(0.0, 3.8)	N	1.03
BARTON MEMORIAL HOSP, SOUTH LAKE TAHOE	0	8326	0.0	(0.0, 3.6)	N	1.11
BELLFLOWER MED CTR	1	26697	0.4	(0.0, 2.1)	N	0.80

Table 6. Incidence rates of hospital-onset methicillin-resistant *Staphylococcus aureus* bloodstream infections reported by California community hospitals, restricted to facilities that reported at least ten months of data, April 1, 2010 through March 31, 2011 (inclusive).

Hospital licensee and/or campus name	Cases	Patient Days	Incidence Rate	95% Confidence Interval	Compared To Pooled Mean***	Case Mix Index
BEVERLY HOSP, MONTEBELLO	3	38140	0.8	(0.2, 2.3)	N	1.15
BROTMAN MED CTR, CULVER CITY	0	36589	0.0	(0.0, 0.8)	N	1.19
CALIFORNIA HOSP MED CTR, LOS ANGELES	2	84888	0.2	(0.0, 0.9)	N	0.96
CALIFORNIA MENS COLONY, SAN LUIS OBISPO	0	12282	0.0	(0.0, 2.4)	N	
CALIFORNIA PACIFIC MED CTR, ST LUKE'S CAMPUS, SAN FRANCISCO	1	34885	0.3	(0.0, 1.6)	N	1.17
CASA COLINA HOSP FOR REHABILITATIVE MEDICINE, POMONA	0	21640	0.0	(0.0, 1.4)	N	1.17
CATALINA ISLAND MED CTR, AVALON	0	103	0.0	(0.0, 290.8)	N	0.88
† CATHOLIC HEALTHCARE WEST	1	55419	0.2	(0.0, 1.0)	N	
DOMINICAN HOSP CAMPUS #1, SANTA CRUZ						1.30
DOMINICAN HOSP CAMPUS #2, SANTA CRUZ						
† CATHOLIC HEALTHCARE WEST	0	59425	0.0	(0.0, 0.5)	N	
MERCY HOSP, BAKERSFIELD						1.16
MERCY SOUTHWEST HOSP, BAKERSFIELD						
CENTINELA HOSP MED CTR, INGLEWOOD	8	67688	1.2	(0.5, 2.3)	N	1.37
CENTRAL VALLEY GENERAL HOSP, HANFORD	1	12180	0.8	(0.0, 4.6)	N	0.68
CHAPMAN MED CTR, ORANGE	0	5116	0.0	(0.0, 5.9)	N	1.33
CHINO VALLEY ME CTR, CHINO	0	17569	0.0	(0.0, 1.7)	N	1.31
† CITRUS VALLEY MED CTR, INC.	10	128731	0.8	(0.4, 1.4)	N	
CITRUS VALLEY MED CTR, IC, COVINA						1.37
CITRUS VALLEY MED CTR, QV, WEST COVINA						1.01
CITY OF HOPE HELFORD CLINICAL RESEARCH HOSP, DUARTE	3	57353	0.5	(0.1, 1.5)	N	2.10
CLOVIS COMMUNITY MED CTR	3	38237	0.8	(0.2, 2.3)	N	0.91
COALINGA REGIONAL MED CTR	0	3633	0.0	(0.0, 8.2)	N	0.85

Table 6. Incidence rates of hospital-onset methicillin-resistant *Staphylococcus aureus* bloodstream infections reported by California community hospitals, restricted to facilities that reported at least ten months of data, April 1, 2010 through March 31, 2011 (inclusive).

Hospital licensee and/or campus name	Cases	Patient Days	Incidence Rate	95% Confidence Interval	Compared To Pooled Mean***	Case Mix Index
COAST PLAZA HOSP, NORWALK	0	13486	0.0	(0.0, 2.2)	N	1.11
COASTAL COMMUNITIES HOSP, SANTA ANA	2	23164	0.9	(0.1, 3.1)	N	0.90
COLLEGE HOSP COSTA MESA	0	37672	0.0	(0.0, 0.8)	N	0.84
COLORADO RIVER MED CTR, NEEDLES	0	1427	0.0	(0.0, 21.0)	N	0.77
COLUSA REG MED CTR	0	3338	0.0	(0.0, 9.0)	N	0.83
COMMUNITY HOSP OF LONG BEACH	1	11506	0.9	(0.0, 4.8)	N	1.12
COMMUNITY HOSP OF SAN BERNARDINO	2	85728	0.2	(0.0, 0.8)	N	0.93
COMMUNITY HOSP OF THE MONTEREY PENINSULA, MONTEREY	0	47630	0.0	(0.0, 0.6)	N	1.35
COMMUNITY MEMORIAL HOSP, SAN BUENAVENTURA, VENTURA	0	53593	0.0	(0.0, 0.6)	N	1.28
CONTRA COSTA REGIONAL MED CTR, MARTINEZ	1	44072	0.2	(0.0, 1.3)	N	0.91
† COUNTY OF VENTURA	6	53266	1.1	(0.4, 2.5)	N	
VENTURA COUNTY MED CTR						1.01
VENTURA COUNTY MED CTR, SANTA PAULA						
DAMERON HOSP, STOCKTON	8	47290	1.7	(0.7, 3.3)	H	1.18
DELANO REGIONAL MED CTR	3	21366	1.4	(0.3, 4.1)	N	0.96
DESERT REGIONAL MED CTR, PALM SPRINGS	3	72467	0.4	(0.1, 1.2)	N	1.23
DESERT VALLEY HOSP, VICTORVILLE	3	25587	1.2	(0.2, 3.4)	N	1.35
DOCTORS HOSP OF MANTECA	0	18208	0.0	(0.0, 1.6)	N	0.93
DOCTORS HOSP OF WEST COVINA*	0	658	0.0	(0.0, 45.5)	N	1.37
DOCTORS MED CTR, MODESTO	8	114266	0.7	(0.3, 1.4)	N	1.20
DOCTORS MED CTR, SAN PABLO	1	30945	0.3	(0.0, 1.8)	N	1.48
DOWNEY REGIONAL MED CTR	3	43736	0.7	(0.1, 2.0)	N	1.15
EAST LOS ANGELES DOCTORS HOSP, LOS ANGELES	2	30316	0.7	(0.1, 2.4)	N	0.98
EAST VALLEY HOSP MED CTR, GLENDORA	0	8552	0.0	(0.0, 3.5)	N	1.06

Table 6. Incidence rates of hospital-onset methicillin-resistant *Staphylococcus aureus* bloodstream infections reported by California community hospitals, restricted to facilities that reported at least ten months of data, April 1, 2010 through March 31, 2011 (inclusive).

Hospital licensee and/or campus name	Cases	Patient Days	Incidence Rate	95% Confidence Interval	Compared To Pooled Mean***	Case Mix Index
EASTERN PLUMAS HEALTH CARE, PORTOLA	0	1143	0.0	(0.0, 26.2)	N	0.87
† EDEN MED CTR	0	58811	0.0	(0.0, 0.5)	N	
EDEN MED CTR, CASTRO VALLEY						1.31
SAN LEANDRO HOSP						1.42
EISENHOWER MED CTR, RANCHO MIRAGE	0	79330	0.0	(0.0, 0.4)	L	1.56
EL CENTRO REGIONAL MED CTR	0	25550	0.0	(0.0, 1.2)	N	1.00
EMANUEL MED CTR INC, TURLOCK	2	47137	0.4	(0.1, 1.5)	N	1.05
ENCINO HOSP MED CTR, ENCINO	0	21064	0.0	(0.0, 1.4)	N	1.43
† ENLOE MED CTR	0	71488	0.0	(0.0, 0.4)	L	
ENLOE MED CTR, COHASSET, CHICO						
ENLOE MED CTR, ESPLANADE, CHICO						1.43
ENLOE REHABILITATION CTR, CHICO						
FAIRCHILD MED CTR, YREKA	0	5082	0.0	(0.0, 5.9)	N	1.00
FAIRVIEW DEVELOPMENTAL CTR, COSTA MESA	0	544	0.0	(0.0, 55.1)	N	
FALLBROOK HOSP DISTRICT	0	8122	0.0	(0.0, 3.7)	N	1.00
FEATHER RIVER HOSP, PARADISE	0	22726	0.0	(0.0, 1.3)	N	1.16
FOOTHILL PRESBYTERIAN HSP-JOHNSTON MEMORIAL, GLENDORA	1	21955	0.5	(0.0, 2.5)	N	1.08
† FOUNTAIN VALLEY REGIONAL HOSP & MED CTR	3	90565	0.3	(0.1, 1.0)	N	
FOUNTAIN VALLEY REGIONAL HOSP & MED CTR						1.31
FOUNTAIN VALLEY REGIONAL HOSP & MED CTR						
† THE FREMONT-RIDEOUT HEALTH GROUP	1	49886	0.2	(0.0, 1.1)	N	
FREMONT MED CTR, YUBA CITY						0.79
RIDEOUT MEMORIAL HOSP, MARYSVILLE						1.22
FRANK R. HOWARD MEMORIAL HOSP, WILLITS	0	5581	0.0	(0.0, 5.4)	N	1.41
FRENCH HOSP MED CTR, SAN LUIS OBISPO	0	18110	0.0	(0.0, 1.7)	N	1.35

Table 6. Incidence rates of hospital-onset methicillin-resistant *Staphylococcus aureus* bloodstream infections reported by California community hospitals, restricted to facilities that reported at least ten months of data, April 1, 2010 through March 31, 2011 (inclusive).

Hospital licensee and/or campus name	Cases	Patient Days	Incidence Rate	95% Confidence Interval	Compared To Pooled Mean***	Case Mix Index
FRESNO HEART AND SURGICAL HOSP	0	10472	0.0	(0.0, 2.9)	N	2.01
FRESNO SURGICAL HOSP	0	4169	0.0	(0.0, 7.2)	N	1.92
GARDEN GROVE HOSP AND MED CTR	5	24976	2.0	(0.7, 4.7)	H	1.05
GARFIELD MED CTR, MONTEREY PARK	3	61194	0.5	(0.1, 1.4)	N	1.10
GEORGE L. MEE MEMORIAL HOSP, KING CITY	0	6089	0.0	(0.0, 4.9)	N	0.96
GLENDALE ADVENTIST MED CTR	5	110824	0.5	(0.1, 1.1)	N	1.21
GLENDALE MEMORIAL HOSP AND HEALTH CTR	0	60738	0.0	(0.0, 0.5)	N	1.36
GLENN MED CTR, WILLOWS	0	1156	0.0	(0.0, 25.9)	N	0.82
GOLETA VALLEY COTTAGE HOSP, SANTA BARBARA	1	15848	0.6	(0.0, 3.5)	N	1.47
GOOD SAMARITAN HOSP, LOS ANGELES	12	72263	1.7	(0.9, 2.9)	H	1.22
† GOOD SAMARITAN HOSP, LP GOOD SAMARITAN HOSP, SAN JOSE MISSION OAKS HOSP, LOS GATOS	3	89098	0.3	(0.1, 1.0)	N	1.27
GREATER EL MONTE COMMUNITY HOSP	2	14515	1.4	(0.2, 5.0)	N	0.98
GROSSMONT HOSP, LA MESA	11	121460	0.9	(0.5, 1.6)	N	1.26
HAZEL HAWKINS MEMORIAL HOSP, HOLLISTER	0	8248	0.0	(0.0, 3.6)	N	0.94
HEALDSBURG DISTRICT HOSP	2	4180	4.8	(0.6, 17.3)	H	1.25
HEALTHSOUTH TUSTIN REHABILITATION HOSP	0	15162	0.0	(0.0, 2.0)	N	1.21
HEMET VALLEY MED CTR	7	44182	1.6	(0.6, 3.3)	H	1.11
HENRY MAYO NEWHALL MEMORIAL HOSP, VALENCIA	1	61978	0.2	(0.0, 0.9)	N	1.13
HI-DESERT MED CTR, JOSHUA TREE	0	11863	0.0	(0.0, 2.5)	N	0.99
‡ HOAG MEMORIAL HOSP PRESBYTERIAN, INC HOAG HOSPITAL, IRVINE HOAG MEMORIAL HOSP PRESBYTERIAN, NEWPORT BEACH	1	131274	0.1	(0.0, 0.4)	L	1.34
HOLLYWOOD COMMUNITY HOSP OF HOLLYWOOD	6	20751	2.9	(1.1, 6.3)	H	1.19

Table 6. Incidence rates of hospital-onset methicillin-resistant *Staphylococcus aureus* bloodstream infections reported by California community hospitals, restricted to facilities that reported at least ten months of data, April 1, 2010 through March 31, 2011 (inclusive).

Hospital licensee and/or campus name	Cases	Patient Days	Incidence Rate	95% Confidence Interval	Compared To Pooled Mean***	Case Mix Index
HOLLYWOOD PRESBYTERIAN MED CTR, LOS ANGELES	10	76400	1.3	(0.6, 2.4)	H	1.04
‡ HOSPITAL COMMITTEE AREA LIVERMORE PLEASANTON VALLEY MEMORIAL HOSPITAL, LIVERMORE VALLEYCARE MEDICAL CENTER, PLEASANTON	0	32661	0.0	(0.0, 0.9)	N	1.28
HUNTINGTON BEACH HOSP	0	15786	0.0	(0.0, 1.9)	N	1.38
HUNTINGTON MEMORIAL HOSP, PASADENA	6	137160	0.4	(0.2, 1.0)	N	1.27
JEROLD PHELPS COMMUNITY HOSP, GARBERVILLE**	0	83	0.0	(0.0, 360.9)	N	0.90
JOHN C. FREMONT HEALTHCARE DISTRICT, MARIPOSA	0	704	0.0	(0.0, 42.6)	N	0.94
JOHN F. KENNEDY MEMORIAL HOSP, INDIO	1	31053	0.3	(0.0, 1.8)	N	0.97
JOHN MUIR MED CTR, CONCORD	2	45808	0.4	(0.1, 1.6)	N	1.73
JOHN MUIR MED CTR, WALNUT CREEK	2	86030	0.2	(0.0, 0.8)	N	1.39
KAISER FOUNDATION HOSP & REHAB. CTR, VALLEJO	2	64393	0.3	(0.0, 1.1)	N	1.14
KAISER FOUNDATION HOSP, ANTIOCH	2	34560	0.6	(0.1, 2.1)	N	1.20
KAISER FOUNDATION HOSP, BALDWIN PARK	2	48418	0.4	(0.1, 1.5)	N	1.10
KAISER FOUNDATION HOSP, DOWNEY	5	80610	0.6	(0.2, 1.4)	N	1.10
KAISER FOUNDATION HOSP, FONTANA	7	123454	0.6	(0.2, 1.2)	N	1.18
KAISER FOUNDATION HOSP, FRESNO	1	30056	0.3	(0.0, 1.9)	N	1.24
KAISER FOUNDATION HOSP, MORENO VALLEY	0	20096	0.0	(0.0, 1.5)	N	0.81
KAISER FOUNDATION HOSP, PANORAMA CITY	1	44240	0.2	(0.0, 1.3)	N	1.10
KAISER FOUNDATION HOSP, REDWOOD CITY**	0	32465	0.0	(0.0, 0.9)	N	1.40
KAISER FOUNDATION HOSP, RIVERSIDE	0	55089	0.0	(0.0, 0.5)	N	1.10
KAISER FOUNDATION HOSP, SAN DIEGO	7	112969	0.6	(0.2, 1.3)	N	1.17
KAISER FOUNDATION HOSP, SAN FRANCISCO	3	101664	0.3	(0.1, 0.9)	N	1.40

Table 6. Incidence rates of hospital-onset methicillin-resistant *Staphylococcus aureus* bloodstream infections reported by California community hospitals, restricted to facilities that reported at least ten months of data, April 1, 2010 through March 31, 2011 (inclusive).

Hospital licensee and/or campus name	Cases	Patient Days	Incidence Rate	95% Confidence Interval	Compared To Pooled Mean***	Case Mix Index
KAISER FOUNDATION HOSP, SAN JOSE	1	51310	0.2	(0.0, 1.1)	N	1.20
KAISER FOUNDATION HOSP, SAN RAFAEL**	1	20351	0.5	(0.0, 2.7)	N	1.30
KAISER FOUNDATION HOSP, SANTA CLARA	3	110524	0.3	(0.1, 0.8)	N	1.36
KAISER FOUNDATION HOSP, SANTA ROSA	0	32225	0.0	(0.0, 0.9)	N	1.16
KAISER FOUNDATION HOSP, SOUTH BAY, HARBOR CITY	4	57876	0.7	(0.2, 1.8)	N	1.18
KAISER FOUNDATION HOSP, SOUTH SACRAMENTO	1	46692	0.2	(0.0, 1.2)	N	1.17
KAISER FOUNDATION HOSP, SOUTH SAN FRANCISCO	0	26858	0.0	(0.0, 1.1)	N	1.48
KAISER FOUNDATION HOSP, SUNSET, LOS ANGELES	15	111102	1.4	(0.8, 2.2)	H	1.61
KAISER FOUNDATION HOSP, VACAVILLE	0	14573	0.0	(0.0, 2.1)	N	1.25
KAISER FOUNDATION HOSP, WALNUT CREEK	2	69835	0.3	(0.0, 1.0)	N	1.18
KAISER FOUNDATION HOSP, WEST LA, LOS ANGELES	0	47640	0.0	(0.0, 0.6)	N	1.17
KAISER FOUNDATION HOSP, WOODLAND HILLS	5	53253	0.9	(0.3, 2.2)	N	1.30
‡ KAISER FOUNDATION HOSP						
KAISER FOUNDATION HOSP, ANAHEIM	3	53089	0.6	(0.1, 1.7)	N	1.15
KAISER FOUNDATION HOSP, IRVINE	2	46073	0.4	(0.1, 1.6)	N	
† KAISER FOUNDATION HOSPS	1	57651	0.2	(0.0, 1.0)	N	
KAISER FOUNDATION HOSP, FREMONT						
KAISER FOUNDATION HOSP, HAYWARD						1.19
† KAISER FOUNDATION HOSPS	0	37955	0.0	(0.0, 0.8)	N	
KAISER FOUNDATION HOSP, MANTECA						1.08
KAISER FOUNDATION HOSP, MODESTO						
‡ KAISER FOUNDATION HOSPS						
KAISER FOUNDATION HOSP- ROSEVILLE	2	91178	0.2	(0.0, 0.8)	N	
KAISER FOUNDATION HOSP- SACRAMENTO	0	53139	0.0	(0.0, 0.6)	N	1.31

Table 6. Incidence rates of hospital-onset methicillin-resistant *Staphylococcus aureus* bloodstream infections reported by California community hospitals, restricted to facilities that reported at least ten months of data, April 1, 2010 through March 31, 2011 (inclusive).

Hospital licensee and/or campus name	Cases	Patient Days	Incidence Rate	95% Confidence Interval	Compared To Pooled Mean***	Case Mix Index
† KAISER FOUNDATION HOSPS	2	89113	0.2	(0.0, 0.8)	N	
KAISER FOUNDATION HOSP, OAKLAND						1.38
KAISER FOUNDATION HOSP, RICHMOND						
† KARYKEION, INC	1	11744	0.9	(0.0, 4.8)	N	
COMMUNITY AND MISSION HOSP OF HUNTINGTON PARK CAMPUS #1						0.91
COMMUNITY AND MISSION HOSP OF HUNTINGTON PARK CAMPUS #2						
KAWEAH DELTA MED CTR, VISALIA	6	136882	0.4	(0.2, 1.0)	N	1.23
KERN MED CTR, BAKERSFIELD	2	34558	0.6	(0.1, 2.1)	N	0.95
KERN VALLEY HEALTHCARE DISTRICT, LAKE ISABELLA	0	3961	0.0	(0.0, 7.6)	N	1.06
LA PALMA INTERCOMMUNITY HOSP	0	17728	0.0	(0.0, 1.7)	N	1.11
LAGUNA HONDA HOSP & REHAB CTR, SAN FRANCISCO	0	1828	0.0	(0.0, 16.4)	N	1.21
LAKEWOOD REGIONAL MED CTR	7	39727	1.8	(0.7, 3.6)	H	1.53
LANTERMAN DEVELOPMENTAL CTR, POMONA	0	1213	0.0	(0.0, 24.7)	N	
† LODI MEMORIAL HOSP ASSOCIATION, INC.	0	34875	0.0	(0.0, 0.9)	N	
LODI MEMORIAL HOSP (1RH)						1.01
LODI MEMORIAL HOSP-WEST						
LOMPOC VALLEY MED CTR	0	9025	0.0	(0.0, 3.3)	N	0.99
LONG BEACH MEMORIAL MED CTR, LONG BEACH	1	104369	0.1	(0.0, 0.5)	N	1.43
LOS ALAMITOS MED CTR	0	48982	0.0	(0.0, 0.6)	N	1.07
LOS ANGELES METROPOLITAN MED CTR	4	36817	1.1	(0.3, 2.8)	N	0.91

Table 6. Incidence rates of hospital-onset methicillin-resistant *Staphylococcus aureus* bloodstream infections reported by California community hospitals, restricted to facilities that reported at least ten months of data, April 1, 2010 through March 31, 2011 (inclusive).

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† LOS ROBLES REGIONAL MED CTR	3	83840	0.4	(0.1, 1.0)	N	
LOS ROBLES HOSP, E, THOUSAND OAKS						
LOS ROBLES HOSP, THOUSAND OAKS						1.38
MAD RIVER COMMUNITY HOSP, ARCATA	0	8393	0.0	(0.0, 3.6)	N	0.93
MADERA COMMUNITY HOSP	2	26867	0.7	(0.1, 2.7)	N	0.82
MAMMOTH HOSP	0	1848	0.0	(0, 16.2)	N	1.12
MARIAN MED CTR, SANTA MARIA	1	39403	0.3	(0.0, 1.4)	N	1.09
MARIN GENERAL HOSP, GREENBRAE	0	44600	0.0	(0.0, 0.7)	N	1.25
MARINA DEL REY HOSP	1	17027	0.6	(0.0, 3.3)	N	1.75
MARK TWAIN ST JOSEPH'S HOSP, SAN ANDREAS	0	5242	0.0	(0.0, 5.7)	N	1.12
MARSHALL MED CTR (1-RH), PLACERVILLE	0	22129	0.0	(0.0, 1.4)	N	1.25
MAYERS MEMORIAL HOSP, FALL RIVER MILLS	0	1568	0.0	(0.0, 19.1)	N	0.79
MEMORIAL HOSP LOS BANOS	0	6176	0.0	(0.0, 4.9)	N	0.69
MEMORIAL HOSP OF GARDENA	11	28528	3.9	(1.9, 6.9)	H	1.18
MEMORIAL MED CTR, MODESTO	4	101449	0.4	(0.1, 1.0)	N	1.35
MENDOCINO COAST DISTRICT HOSP, FORT BRAGG	1	4977	2.0	(0.1, 11.2)	N	1.06
MENIFEE VALLEY MED CTR, SUN CITY	0	16776	0.0	(0.0, 1.8)	N	1.23
MERCY GENERAL HOSP, SACRAMENTO	1	84160	0.1	(0.0, 0.7)	N	1.58
MERCY HOSP OF FOLSOM	0	20249	0.0	(0.0, 1.5)	N	1.05
MERCY MED CTR MERCED	7	56382	1.2	(0.5, 2.6)	N	1.00
MERCY MED CTR MT. SHASTA	0	3613	0.0	(0.0, 8.3)	N	1.18
MERCY MED CTR REDDING	4	57576	0.7	(0.2, 1.8)	N	1.46
MERCY SAN JUAN MED CTR, CARMICHAEL	5	95034	0.5	(0.2, 1.2)	N	1.28
METHODIST HOSP OF SACRAMENTO	0	33967	0.0	(0.0, 0.9)	N	1.17
METHODIST HOSP OF SOUTHERN CA, ARCADIA	6	88262	0.7	(0.2, 1.5)	N	1.28

Table 6. Incidence rates of hospital-onset methicillin-resistant *Staphylococcus aureus* bloodstream infections reported by California community hospitals, restricted to facilities that reported at least ten months of data, April 1, 2010 through March 31, 2011 (inclusive).

Hospital licensee and/or campus name	Cases	Patient Days	Incidence Rate	95% Confidence Interval	Compared To Pooled Mean***	Case Mix Index
† MILLS-PENINSULA HEALTH SERVICES	2	59252	0.3	(0.0, 1.2)	N	
MILLS HEALTH CTR, SAN MATEO						
PENINSULA MED CTR, BURLINGAME						1.23
MIRACLE MILE MED CTR, LOS ANGELES	0	805	0.0	(0.0, 37.2)	N	3.08
MISSION COMMUNITY HOSP, PANORAMA	1	15204	0.7	(0.0, 3.7)	N	1.15
† MISSION HOSP REGIONAL MED CTR	5	76599	0.7	(0.2, 1.5)	N	
MISSION HOSP LAGUNA BEACH						0.99
MISSION HOSP REGIONAL MED CTR						1.22
MODOC MED CTR, ALTURAS	0	1614	0.0	(0.0, 18.6)	N	0.97
MONTEREY PARK HOSP	0	16516	0.0	(0.0, 1.8)	N	0.83
MOTION PICTURE & TELEVISION HOSP, WOODLAND HILLS	0	1229	0.0	(0.0, 24.4)	N	0.94
MOUNTAINS COMMUNITY HOSP, LAKE ARROWHEAD	0	762	0.0	(0.0, 39.3)	N	0.87
NATIVIDAD MED CTR, SALINAS	1	39404	0.3	(0.0, 1.4)	N	0.86
‡ NORTHBAY HEALTHCARE GROUP						
NORTHBAY MED CTR, FAIRFIELD	3	26479	1.1	(0.2, 3.3)	N	1.17
NORTHBAY VACAVALLEY HOSP	0	12570	0.0	(0.0, 2.4)	N	1.36
NORTHERN INYO HOSP, BISHOP	0	2988	0.0	(0.0, 10.0)	N	0.98
NORTHRIDGE HOSP MED CTR	9	87859	1.0	(0.5, 1.9)	N	1.23
NOVATO COMMUNITY HOSP	0	5986	0.0	(0.0, 5.0)	N	1.54
O'CONNOR HOSP, SAN JOSE	2	55094	0.4	(0.0, 1.3)	N	1.09
OAK VALLEY HOSP DISTRICT (2-RH), OAKDALE	1	4676	2.1	(0.1, 11.9)	N	0.96
OJAI VALLEY COMMUNITY HOSP, OJAI	0	2790	0.0	(0.0, 10.7)	N	1.21
OLYMPIA MED CTR, LOS ANGELES	8	34885	2.3	(1.0, 4.5)	H	1.50
ORANGE COAST MEMORIAL MED CTR, FOUNTAIN VALLEY	1	44901	0.2	(0.0, 1.2)	N	1.13

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OROVILLE HOSP	1	38199	0.3	(0.0, 1.5)	N	1.14
PACIFIC ALLIANCE MED CTR	0	30532	0.0	(0.0, 1.0)	N	0.87
PACIFIC HOSP OF LONG BEACH	0	42348	0.0	(0.0, 0.7)	N	1.12
PALM DRIVE HOSP, SEBASTOPOL	0	4434	0.0	(0.0, 6.8)	N	1.55
PALMDALE REGIONAL MEDICAL CTR	0	26278	0.0	(0.0, 1.1)	N	
PALO VERDE HOSP, BLYTHE	0	5253	0.0	(0.0, 5.7)	N	0.87
PALOMAR MED CTR, ESCONDIDO	2	85224	0.2	(0.0, 0.8)	N	1.17
PARADISE VALLEY HOSP, NATIONAL CITY	2	49184	0.4	(0.0, 1.5)	N	1.06
PARKVIEW COMMUNITY HOSP MED CTR, RIVERSIDE	1	39709	0.3	(0.0, 1.4)	N	1.00
PATIENTS' HOSP OF REDDING	0	553	0.0	(0.0, 54.2)	N	1.25
PETALUMA VALLEY HOSP, PETALUMA	0	9869	0.0	(0.0, 3.0)	N	1.16
PLACENTIA LINDA HOSP	0	14143	0.0	(0.0, 2.1)	N	1.23
PLUMAS DISTRICT HOSP, QUINCY	0	2251	0.0	(0.0, 13.3)	N	0.92
POMERADO HOSP, POWAY	1	28496	0.4	(0.0, 2.0)	N	1.16
POMONA VALLEY HOSP MED CTR, POMONA	3	117381	0.3	(0.1, 0.7)	N	1.14
PORTERVILLE DEVELOPMENTAL CTR	0	1377	0.0	(0.0, 21.8)	N	
PRESBYTERIAN INTERCOMMUNITY HOSP, WHITTIER	1	75811	0.1	(0.0, 0.7)	N	1.29
PROVIDENCE HOLY CROSS MED CTR, MISSION HILLS	5	90372	0.6	(0.2, 1.3)	N	1.32
PROVIDENCE LITTLE COMPANY OF MARY MED CTR, SAN PEDRO	3	39064	0.8	(0.2, 2.2)	N	1.06
PROVIDENCE LITTLE COMPANY OF MARY MED CTR, TORRANCE	2	75075	0.3	(0.0, 1.0)	N	1.13
PROVIDENCE SAINT JOSEPH MED CTR, BURBANK	6	97497	0.6	(0.2, 1.3)	N	1.34
PROVIDENCE TARZANA MED CTR, TARZANA	4	64028	0.6	(0.2, 1.6)	N	1.26
QUEEN OF THE VALLEY MED CTR, NAPA	8	40524	2.0	(0.9, 3.9)	H	1.43
REDLANDS COMMUNITY HOSP	0	50430	0.0	(0.0, 0.6)	N	1.12

Table 6. Incidence rates of hospital-onset methicillin-resistant *Staphylococcus aureus* bloodstream infections reported by California community hospitals, restricted to facilities that reported at least ten months of data, April 1, 2010 through March 31, 2011 (inclusive).

Hospital licensee and/or campus name	Cases	Patient Days	Incidence Rate	95% Confidence Interval	Compared To Pooled Mean***	Case Mix Index
REDWOOD MEMORIAL HOSP, FORTUNA	0	6283	0.0	(0.0, 4.8)	N	0.99
RIDGECREST REGIONAL HOSP	0	12400	0.0	(0.0, 2.4)	N	1.02
RIVERSIDE COMMUNITY HOSP	0	97750	0.0	(0.0, 0.3)	L	1.35
† SADDLEBACK MEMORIAL MED CTR	0	67825	0.0	(0.0, 0.4)	L	
SADDLEBACK MEMORIAL MED CTR						1.26
SADDLEBACK MEMORIAL MED CTR, SAN CLEMENTE						
SAINT AGNES MED CTR, FRESNO	4	107300	0.4	(0.1, 1.0)	N	1.26
SAINT FRANCIS MED CTR, LYNWOOD	9	112935	0.8	(0.4, 1.5)	N	1.01
SAINT FRANCIS MEMORIAL HOSP, SAN FRANCISCO	1	31049	0.3	(0.0, 1.8)	N	1.44
SAINT JOHN'S HEALTH CTR, SANTA MONICA	1	58234	0.2	(0.0, 1.0)	N	1.50
SAINT LOUISE REGIONAL HOSP, GILROY	1	13033	0.8	(0.0, 4.3)	N	1.08
SAINT VINCENT MED CTR, LOS ANGELES	8	42848	1.9	(0.8, 3.7)	H	1.63
SALINAS VALLEY MEMORIAL HOSP	2	48479	0.4	(0.0, 1.5)	N	1.28
SAN ANTONIO COMMUNITY HOSP, UPLAND	2	60532	0.3	(0.0, 1.2)	N	1.29
SAN DIMAS COMMUNITY HOSP	0	13467	0.0	(0.0, 2.2)	N	1.13
SAN GABRIEL VALLEY MED CTR, SAN GABRIEL	2	35858	0.6	(0.1, 2.0)	N	1.10
SAN GORGONIO MEMORIAL HOSP, BANNING	0	12832	0.0	(0.0, 2.3)	N	1.05
SAN JOAQUIN COMMUNITY HOSP, BAKERSFIELD	0	72699	0.0	(0.0, 0.4)	L	1.24
SAN JOAQUIN GENERAL HOSP, FRENCH P	0	42992	0.0	(0.0, 0.7)	N	1.03
SAN JOAQUIN VALLEY REHAB HOSP, FRESNO	0	16992	0.0	(0.0, 1.8)	N	1.20
SAN MATEO MED CTR	1	21007	0.5	(0.0, 2.7)	N	1.19
† SAN RAMON REGIONAL MED CTR, INC.	0	19043	0.0	(0.0, 1.6)	N	
SAN RAMON REGIONAL MED CTR						1.30
SAN RAMON REGIONAL MED CTR SOUTH						
SANTA BARBARA COTTAGE HOSP	0	84018	0.0	(0.0, 0.4)	L	1.31

Table 6. Incidence rates of hospital-onset methicillin-resistant *Staphylococcus aureus* bloodstream infections reported by California community hospitals, restricted to facilities that reported at least ten months of data, April 1, 2010 through March 31, 2011 (inclusive).

Hospital licensee and/or campus name	Cases	Patient Days	Incidence Rate	95% Confidence Interval	Compared To Pooled Mean***	Case Mix Index
SANTA ROSA MEMORIAL HOSP	2	60755	0.3	(0.0, 1.2)	N	1.54
SANTA YNEZ VALLEY COTTAGE HOSP, SOLVANG	0	1030	0.0	(0.0, 29.1)	N	0.97
SCRIPPS GREEN HOSP, LA JOLLA	1	41783	0.2	(0.0, 1.3)	N	1.85
SCRIPPS MEMORIAL HOSP, ENCINITAS	1	44779	0.2	(0.0, 1.2)	N	1.19
SCRIPPS MEMORIAL HOSP, LA JOLLA	3	72700	0.4	(0.1, 1.2)	N	1.34
SENECA HEALTHCARE DISTRICT, CHESTER	0	812	0.0	(0.0, 36.9)	N	0.89
SEQUOIA HOSP, REDWOOD CITY	1	30993	0.3	(0.0, 1.8)	N	1.28
SHARP CHULA VISTA MED CTR	7	73531	1.0	(0.4, 2.0)	N	1.21
SHARP CORONADO HOSP AND HEALTHCARE CTR	0	9558	0.0	(0.0, 3.1)	N	1.72
SHARP MARY BIRCH FOR WOMEN & NEWBORNS, SAN DIEGO	0	70470	0.0	(0.0, 0.4)	L	0.70
SHARP MEMORIAL HOSP, SAN DIEGO	5	97219	0.5	(0.2, 1.2)	N	1.25
SHASTA REGIONAL MED CTR, REDDING	2	31670	0.6	(0.1, 2.3)	N	1.63
SHERMAN OAKS HOSP	0	17767	0.0	(0.0, 1.7)	N	1.60
SIERRA KINGS DISTRICT HOSP, REEDLEY	0	6443	0.0	(0.0, 4.6)	N	0.64
SIERRA NEVADA MEMORIAL HOSP, GRASS VALLEY	3	18122	1.7	(0.3, 4.8)	N	1.15
SIERRA VIEW DISTRICT HOSP, PORTERVILLE	0	34568	0.0	(0.0, 0.9)	N	1.01
SIERRA VISTA REGIONAL MED CTR, SAN LUIS OBISPO	2	28048	0.7	(0.1, 2.6)	N	1.15
SILVER LAKE MED CTR, LOS ANGELES	0	22104	0.0	(0.0, 1.4)	N	1.13
SIMI VALLEY HOSP & HEALTH CARE SERVICES	3	31055	1.0	(0.2, 2.8)	N	1.23
SONOMA DEVELOPMENTAL CTR, ELDRIDGE	0	902	0.0	(0.0, 33.2)	N	
SONOMA VALLEY HOSP	0	5646	0.0	(0.0, 5.3)	N	1.19
‡ SONORA REGIONAL MED CTR	0	21104	0.0	(0.0, 1.4)	N	
SONORA REGIONAL MED CTR CAMPUS #1						1.26
SONORA REGIONAL MED CTR CAMPUS #2						
ST BERNARDINE MED CTR	6	74502	0.8	(0.3, 1.8)	N	1.56

Table 6. Incidence rates of hospital-onset methicillin-resistant *Staphylococcus aureus* bloodstream infections reported by California community hospitals, restricted to facilities that reported at least ten months of data, April 1, 2010 through March 31, 2011 (inclusive).

Hospital licensee and/or campus name	Cases	Patient Days	Incidence Rate	95% Confidence Interval	Compared To Pooled Mean***	Case Mix Index
ST ELIZABETH COMMUNITY HOSP, RED BLUFF	0	9950	0.0	(0.0, 3.0)	N	1.02
ST HELENA HOSP, CLEARLAKE	0	7097	0.0	(0.0, 4.2)	N	0.89
ST HELENA HOSP, ST HELENA	0	19451	0.0	(0.0, 1.5)	N	1.47
ST JOHN'S PLEASANT VALLEY HOSP, ARILLO	0	15395	0.0	(0.0, 1.9)	N	1.33
ST JOHN'S REGIONAL MED CTR, OXNARD	1	58314	0.2	(0.0, 1.0)	N	1.28
‡ ST JOSEPH HOSP EUREKA						
ST JOSEPH HOSP, EUREKA	2	29569	0.7	(0.1, 2.4)	N	1.44
THE GENERAL HOSP, EUREKA	0	2490	0.0	(0.0, 12.0)	N	
ST JOSEPH HOSP, ORANGE	4	87552	0.5	(0.1, 1.2)	N	1.37
ST JOSEPH'S MED CTR OF STOCKTON	10	88317	1.1	(0.5, 2.1)	N	1.32
ST JUDE MED CTR, FULLERTON	7	75678	0.9	(0.4, 1.9)	N	1.37
ST MARY MED CTR, APPLE VALLEY	4	67945	0.6	(0.2, 1.5)	N	1.17
ST MARY MED CTR, LONG BEACH	2	64386	0.3	(0.0, 1.1)	N	1.09
ST MARY'S MED CTR, SAN FRANCISCO	0	36631	0.0	(0.0, 0.8)	N	1.56
ST ROSE HOSP, HAYWARD	5	45163	1.1	(0.4, 2.6)	N	1.18
STANISLAUS SURGICAL HOSP, MODESTO	0	2311	0.0	(0.0, 13.0)	N	1.67
SURPRISE VALLEY COMMUNITY HOSP, CEDARVILLE	0	82	0.0	(0.0, 365.3)	N	0.80
SUTTER AMADOR HOSP, JACKSON	0	7512	0.0	(0.0, 4.0)	N	1.02
SUTTER AUBURN FAITH HOSP, AUBURN	2	14790	1.4	(0.2, 4.9)	N	1.34
SUTTER COAST HOSP, CRESCENT CITY	0	8164	3.0	(0.0, 3.7)	N	1.09
SUTTER DAVIS HOSPITAL, DAVIS	0	11365	0.0	(0.0, 2.6)	N	0.89
SUTTER DELTA MED CTR, ANTIOCH	10	32992	3.0	(1.5, 5.6)	H	1.13

Table 6. Incidence rates of hospital-onset methicillin-resistant *Staphylococcus aureus* bloodstream infections reported by California community hospitals, restricted to facilities that reported at least ten months of data, April 1, 2010 through March 31, 2011 (inclusive).

Hospital licensee and/or campus name	Cases	Patient Days	Incidence Rate	95% Confidence Interval	Compared To Pooled Mean***	Case Mix Index
† SUTTER EAST BAY HOSPS CTR	9	221833	0.4	(0.2, 0.7)	N	
ALTA BATES SUMMIT MED CTR, ALTA BATES CAMPUS, BERKELEY						0.96
ALTA BATES SUMMIT MED CTR, HERRICK CAMPUS, BERKELEY						0.94
ALTA BATES SUMMIT MED CTR, SUMMIT CAMPUS #1, OAKLAND						1.78
ALTA BATES SUMMIT MED CTR, SUMMIT CAMPUS #2, OAKLAND						
† SUTTER HEALTH SACRAMENTO SIERRA REGION	18	137657	1.3	(0.8, 2.1)	H	
SUTTER GENERAL HOSP, SACRAMENTO						1.64
SUTTER MEMORIAL HOSP, SACRAMENTO						1.27
SUTTER LAKESIDE HOSP, LAKEPORT	1	7184	1.4	(0.0, 7.8)	N	1.17
SUTTER MATERNITY & SURGERY CTR OF SANTA CRUZ	0	4305	0.0	(0.0, 7.0)	N	0.82
SUTTER MED CTR OF SANTA ROSA	1	24332	0.4	(0.0, 2.3)	N	1.20
SUTTER ROSEVILLE MED CTR	0	60545	0.0	(0.0, 0.5)	N	1.24
SUTTER SOLANO MED CTR, VALLEJO	1	21094	0.5	(0.0, 2.6)	N	1.20
SUTTER SURGICAL HOSP, NORTH VALLEY, YUBA CITY	0	1664	0.0	(0.0, 18.0)	N	1.57
SUTTER TRACY COMMUNITY HOSP, TRACY	0	16950	0.0	(0.0, 1.8)	N	0.99
† SUTTER WEST BAY HOSPS	2	176801	0.1	(0.0, 0.4)	L	
CALIFORNIA PACIFIC MED CTR, CA WEST						
CALIFORNIA PACIFIC MED CTR, DAVIES CAM HOSP, SAN FRANCISCO						
CALIFORNIA PACIFIC MED CTR, PACIFIC CAM HOSP, SAN FRANCISCO						1.31
TAHOE FOREST HOSP, TRUCKEE	0	6108	0.0	(0.0, 4.9)	N	1.04

Table 6. Incidence rates of hospital-onset methicillin-resistant *Staphylococcus aureus* bloodstream infections reported by California community hospitals, restricted to facilities that reported at least ten months of data, April 1, 2010 through March 31, 2011 (inclusive).

Hospital licensee and/or campus name	Cases	Patient Days	Incidence Rate	95% Confidence Interval	Compared To Pooled Mean***	Case Mix Index
TEHACHAPI HOSP, TEHACHAPI	0	533	0.0	(0.0, 56.2)	N	0.82
TEMPLE COMMUNITY HOSP, LOS ANGELES	1	15958	0.6	(0.0, 3.5)	N	1.10
THOUSAND OAKS SURGICAL HOSP	0	2579	0.0	(0.0, 11.6)	N	1.59
TORRANCE MEMORIAL MED CTR, TORRANCE	7	93420	0.8	(0.3, 1.5)	N	1.24
TRI-CITY MED CTR, OCEANSIDE	4	65786	0.6	(0.2, 1.6)	N	1.20
TRI-CITY REGIONAL MED CTR, HAWAIIAN GARDENS	0	15842	0.0	(0.0, 1.9)	N	1.67
TRINITY HOSP, WEAVERVILLE	0	2186	0.0	(0.0, 13.7)	N	0.95
TULARE REGIONAL MEDICAL CTR	0	24411	0.0	(0.0, 1.2)	N	0.87
TWIN CITIES COMMUNITY HOSP, TEMPLETON	2	32278	0.6	(0.1, 2.2)	N	1.03
† UHS-CORONA, INC.	2	52393	0.4	(0.0, 1.4)	N	
CORONA REGIONAL MED CTR, CAMPUS #1						1.01
CORONA REGIONAL MED CTR, CAMPUS #2						
UKIAH VALLEY MED CTR/HOSP DRIVE, UKIAH	0	12099	0.0	(0.0, 2.5)	N	1.03
† UNIVERSAL HEALTH SERVICES OF RANCHO SPRINGS, INC.	4	65400	0.4	(0.2, 1.6)	N	
SOUTHWEST HEALTHCARE SYSTEMS, MURRIETA						1.01[&]
SOUTHWEST HEALTHCARE SYSTEMS, WILDOMAR						
VALLEY PRESBYTERIAN HOSP, VAN NUYS	5	74284	0.0	(0.2, 1.6)	N	1.05
VERDUGO HILLS HOSP, GLENDALE	1	28710	0.4	(0.0, 1.9)	N	1.09
VICTOR VALLEY COMMUNITY HOSP, VICTORVILLE	2	22607	0.9	(0.1, 3.2)	N	0.96
WASHINGTON HOSP, FREMONT	2	63992	0.3	(0.0, 1.1)	N	1.28
WATSONVILLE COMMUNITY HOSP	0	20445	0.0	(0.0, 1.5)	N	1.02
WEST ANAHEIM MED CTR, ANAHEIM**	3	30793	1.0	(0.2, 2.9)	N	1.57
WEST HILLS HOSP AND MED CTR	3	41745	0.7	(0.2, 2.1)	N	1.29
WESTERN MED CTR ANAHEIM	1	41680	0.2	(0.0, 1.3)	N	0.84

Table 6. Incidence rates of hospital-onset methicillin-resistant *Staphylococcus aureus* bloodstream infections reported by California community hospitals, restricted to facilities that reported at least ten months of data, April 1, 2010 through March 31, 2011 (inclusive).

Hospital licensee and/or campus name	Cases	Patient Days	Incidence Rate	95% Confidence Interval	Compared To Pooled Mean***	Case Mix Index
WESTERN MED CTR SANTA ANA	2	38915	0.5	(0.1, 1.9)	N	1.24
WHITE MEMORIAL MED CTR, LOS ANGELES	6	102743	0.6	(0.2, 1.3)	N	1.10
WHITTIER HOSP MED CTR	3	30021	1.0	(0.2, 2.9)	N	0.92
WOODLAND MEMORIAL HOSP	0	10521	0.0	(0.0, 2.8)	N	1.08

* Reported 11 months of data; **reported 10 months of data; all other hospitals reported 12 months of data

***Incidence rate for hospital compared to pooled mean using 95% confidence intervals: N = no different, H = significantly higher, L = significantly lower than pooled mean. & Mean of all hospitals case mix indices† Hospital reported infection data aggregated over all acute care campuses.

‡ Hospital reported infection data separately by acute care campus

Notes: Rate per 10,000 patient days; 95% confidence interval calculated based on exact Poisson distribution; case mix index was available and listed for most but not all acute care campuses

Source: Methicillin-Resistant *Staphylococcus aureus* and Vancomycin-Resistant *Enterococcus* Bloodstream Infections In California General Acute Care Hospitals, April 2010 Through March 2011

Table 7. Incidence rates of hospital-onset Vancomycin-resistant *Enterococci* bloodstream infections reported by California major teaching acute care facilities, restricted to facilities that reported at least ten months of data, April 1, 2010 - March 31, 2011* (inclusive).

Hospital licensee and/or campus name	Cases	Patient Days	Incidence Rate	95% Confidence Intervals	Compared To Pooled Mean**	Case Mix Index
STATE OF CALIFORNIA POOLED DATA	**307**	**2665759**	**1.2**			**1.40*** **
ARROWHEAD RGN MED CTR, COLTON	8	90508	0.9	(0.4, 1.7)	N	1.04
CEDARS-SINAI MED CTR, LOS ANGELES	47	307193	1.5	(1.1, 2.0)	N	1.46
COMMUNITY REGIONAL MED CTR, FRESNO	15	176656	0.9	(0.5, 1.4)	N	1.27
LAC/HARBOR-UCLA MED CTR, TORRANCE	11	110158	1.0	(0.5, 1.8)	N	1.32
LAC+USC MED CTR, LOS ANGELES	14	182057	0.8	(0.4, 1.3)	N	1.24
† LOMA LINDA UNIVERSITY MED CTR LOMA LINDA UNIV HEART & SURGICAL HOSP, REDLANDS LOMA LINDA UNIV MED CTR EAST HOSP, LOMA LINDA LOMA LINDA UNIV MED CTR, LOMA LINDA	20	210278	1.0	(0.6, 1.5)	N	1.62
LOS ANGELES CO OLIVE VIEW-UCLA MED CTR, SYLMAR	4	70054	0.6	(0.2, 1.5)	N	1.07
RIVERSIDE COUNTY REGIONAL MED CTR	3	93404	0.3	(0.1, 0.9)	L	1.04
RONALD REAGAN UCLA MED CTR, LOS ANGELES	42	149700	2.8	(2.0, 3.8)	H	1.95
SAN FRANCISCO GENERAL HOSP	5	98479	0.5	(0.2, 1.2)	N	1.18
SANTA CLARA VALLEY MED CTR, SAN JOSE	9	135303	0.7	(0.3, 1.3)	N	1.11
SANTA MONICA, UCLA MED CTR AND ORTHOPAEDIC	7	86270	0.8	(0.3, 1.7)	N	1.29
† SCRIPPS HEALTH SCRIPPS MERCY HOSP SCRIPPS MERCY HOSP CHULA VISTA	4	153941	0.3	(0.1, 0.7)	L	
STANFORD HOSP, STANFORD	21	136276	1.5	(1.0, 2.4)	N	1.53
UNIVERSITY OF CALIFORNIA DAVIS MED CTR,	15	167417	0.9	(0.5, 1.5)	N	1.60

Table 7. Incidence rates of hospital-onset Vancomycin-resistant *Enterococci* bloodstream infections reported by California major teaching acute care facilities, restricted to facilities that reported at least ten months of data, April 1, 2010 - March 31, 2011* (inclusive).

Hospital licensee and/or campus name	Cases	Patient Days	Incidence Rate	95% Confidence Intervals	Compared To Pooled Mean**	Case Mix Index
SACRAMENTO						
UNIVERSITY OF CALIFORNIA IRVINE MED CTR, ORANGE	5	103090	0.5	(0.2, 1.1)	L	1.53
† UNIVERSITY OF CALIFORNIA, SAN DIEGO	11	134670	0.8	(0.4, 1.5)	N	
UC SAN DIEGO MED CTR						1.58
UCSD-LA JOLLA, JOHN M. & SALLY B. THORNTON HOSP						
† UNIVERSITY OF CALIFORNIA, SAN FRANCISCO	47	184334	2.6	(1.9, 3.4)	H	
UCSF MED CTR, SAN FRANCISCO						1.85
UCSF MED CTR AT MOUNT ZION, SAN FRANCISCO						
† UNIVERSITY OF SOUTHERN CALIFORNIA	19	75971	2.5	(1.5, 3.9)	H	
USC KENNETH NORRIS JR. CANCER HOSPITAL						1.75
USC UNIVERSITY HOSP, LOS ANGELES						2.35

*All hospitals reported 12 months of data.

**Incidence rate for hospital compared to pooled mean using 95% confidence intervals: N = no different, H = significantly higher, L = significantly lower than pooled mean.

*** Mean of all hospitals case mix indices

† Hospital reported infection data aggregated over all acute care campuses

Notes: Rate per 10,000 patient days; 95% confidence interval calculated based on exact Poisson distribution; case mix index was available and listed for most but not all acute care campuses

Source: Methicillin-Resistant *Staphylococcus aureus* and Vancomycin-Resistant *Enterococcus* Bloodstream Infections In California General Acute Care Hospitals, April 2010 Through March 2011

Table 8. Incidence rates of hospital-onset vancomycin-resistant *Enterococci* bloodstream infections reported by California long-term acute care hospitals, restricted to hospitals that reported at least ten months of data, April 1, 2010 – March 31, 2011 (inclusive).

Hospital licensee and/or campus name	Cases	Patient Days	Incidence Rate	95% Confidence Intervals	Compared To Pooled Mean**	Case Mix Index
STATE OF CALIFORNIA POOLED DATA	**51**	**434363**	**1.2**			**2.42*** **
BALLARD REHAB HOSP, SAN BERNARDINO	0	14606	0.0	(0.0, 2.1)	N	1.09
KENTFIELD REHAB & SPECIALTY HOSP, KENTFIELD	0	33429	0.0	(0.0, 0.9)	L	2.45
KINDRED HOSP, BREA	4	14833	2.7	(0.7, 6.9)	N	2.07
KINDRED HOSP, LOS ANGELES	11	27186	4.1	(2.0, 7.2)	H	3.08
KINDRED HOSP, ONTARIO	0	28972	0.0	(0.0, 1.0)	L	2.92
KINDRED HOSP OF RIVERSIDE, PERRIS	0	12323	0.0	(0.0, 2.4)	N	3.35
KINDRED HOSP, SACRAMENTO, FOLSOM	3	11954	2.5	(0.5, 7.3)	N	2.95
KINDRED HOSP, SAN DIEGO	1	17543	0.6	(0.0, 3.2)	N	2.42
KINDRED HOSP, SAN FRANCISCO BAY AREA	1	17310	0.6	(0.0, 3.2)	N	3.89
KINDRED HOSP, SANTA ANA	1	14572	0.7	(0.0, 3.8)	N	
KINDRED HOSP WESTMINSTER	6	34930	1.7	(0.6, 3.7)	N	2.85
MONROVIA MEMORIAL HOS	0	9112	0.0	(0.0, 3.3)	n	2.52
NEWPORT SPECIALTY HOSP, TUSTIN	0	9235	0.0	(0.0, 3.2)	N	2.09
NORTHERN CA REHAB HOSP, REDDING	1	17198	0.6	(0.0, 3.2)	N	
PROMISE HOSP OF EAST LOS ANGELES, L.P.	0	9763	0.0	(0.0, 3.1)	N	
PROMISE HOSP OF EAST LA-SUBURBAN CAMPUS	9	41624	2.2	(1.0, 4.1)	N	
‡SOUTHERN CALIFORNIA SPECIALTY CARE, INC						
KINDRED HOSP, LA MIRADA	4	24293	1.7	(0.4, 4.2)	N	2.32
KINDRED HOSP, SAN GABRIEL VALLEY, WEST COVINA	3	19760	1.5	(0.3, 4.4)	N	
VIBRA HOSP OF SAN DIEGO, SAN DIEGO	2	28866	0.7	(0.1, 2.5)	N	2.11
VISTA HOSP OF SAN GABRIEL VALLEY, BALDWIN PARK	5	23512	2.1	(0.7, 5.0)	N	2.85
VISTA HOSP OF SOUTH BAY, GARDENA*	0	23342	0.0	(0.0, 1.3)	N	2.31

*Reported 11 months of data; all other hospitals reported 12 months of data.

**Incidence rate for hospital compared to pooled mean using 95% confidence intervals: N = no different, H = significantly higher, L = significantly lower than pooled mean.

*** Mean of all hospitals case mix indices

‡ Hospital reported infection data separately by acute care campus

Notes: Rate per 10,000 patient days; 95% confidence interval calculated based on exact Poisson distribution; case mix index was available and listed for most but not all acute care campuses

Source: Methicillin-Resistant *Staphylococcus aureus* and Vancomycin-Resistant *Enterococcus* Bloodstream Infections In California General Acute Care Hospitals, April 2010 Through March 2011

Table 9. Incidence rates of hospital-onset vancomycin-resistant *Enterococci* bloodstream infections reported by California pediatric acute care hospitals, April 1, 2010 - March 31, 2011* (inclusive).

Hospital licensee and/or campus name	Cases	Patient Days	Incidence Rate	95% Confidence Intervals	Case Mix Index
STATE OF CALIFORNIA POOLED DATA	**9**	**568924**	**0.2**		**1.39****
CHILDREN'S HOSP AT MISSION, MISSION VIEJO	0	9141	0.0	(0.0, 3.3)	1.20
CHILDREN'S HOSP CENTRAL CA, MADERA	2	79391	0.3	(0.0, 0.9)	1.44
CHILDREN'S HOSP OF ORANGE COUNTY, ORANGE	1	58847	0.2	(0.0, 0.9)	1.31
CHILDRENS HOSP AND RESEARCH CTR AT OAKLAND	0	61137	0.0	(0.0, 0.5)	1.24
CHILDREN'S HOSPITAL OF LOS ANGELES	5	88667	0.6	(0.2, 1.3)	1.78
EARL & LORAINE MILLER CHILDREN'S HOSP, LONG BEACH	1	88896	0.1	(0.0, 0.6)	0.88
HEALTHBRIDGE CHILDREN'S HOSPITAL - ORANGE	0	2011	0.0	(0.0, 15.0)	1.09
LUCILE PACKARD CHILDREN'S HOSPITAL	0	90793	0.0	(0.0, 0.3)	1.37
RADY CHILDREN'S HOSPITAL, SAN DIEGO	0	75812	0.0	(0.0, 0.4)	1.44
SHRINERS HOSPS FOR CHILDREN N. CA, SACRAMENTO	0	8522	0.0	(0.0, 3.5)	2.13

*All hospitals reported 12 months of data.

** Mean of all pediatric hospitals case mix indices

Notes: No hospital had incidence rates significantly higher or lower than the State pooled mean. Rate per 10,000 patient days; 95% confidence interval calculated based on exact Poisson distribution; case mix index was available and listed for most but not all acute care campuses

Source: Methicillin-Resistant *Staphylococcus aureus* and Vancomycin-Resistant *Enterococcus* Bloodstream Infections In California General Acute Care Hospitals, April 2010 Through March 2011

Table 10. Incidence rates of hospital-onset vancomycin-resistant *Enterococci* bloodstream infections reported by California community hospitals, restricted to hospitals that reported at least ten months of data, April 1, 2010 through March 31, 2011 (inclusive).

Hospital licensee and/or campus name	Cases	Patient Days	Incidence Rate	95% Confidence Intervals	Compared To Pooled Mean**	Case Mix Index
STATE OF CALIFORNIA POOLED DATA	**421**	**12538155**	**0.3**			**1.19*** **
† ADVENTIST HEALTH SYSTEMS	3	41491	0.7	(0.1, 2.1)	N	
ADVENTIST MED CTR, HANFORD						
SELMA COMMUNITY HOSP						
AHMC ANAHEIM REGIONAL MED CTR, ANAHEIM	0	56060	0.0	(0.0, 0.5)	N	1.28
† ALAMEDA COUNTY MED CTR	5	55605	0.9	(0.3, 2.1)	N	
ALAMEDA COUNTY MED CTR, OAKLAND						1.04
FAIRMONT CAMPUS, SAN LEANDRO						
ALAMEDA HOSP	0	10526	0.0	(0.0, 2.8)	N	1.35
ALHAMBRA HOSP MED CTR	0	22280	0.0	(0.0, 1.3)	N	1.44
† ALTA LOS ANGELES HOSPS, INC.	0	43397	0.0	(0.0, 0.7)	N	
LOS ANGELES COMMUNITY HOSP						0.99
NORWALK COMMUNITY HOSP						1.37
† ALVARADO HOSP, LLC	1	39914	0.3	(0.0, 1.4)	N	
ALVARADO HOSP CAMPUS #1, SAN DIEGO						1.58
ALVARADO HOSP CAMPUS #2, SAN DIEGO						
ANAHEIM GENERAL HOSP	0	2608	0.0	(0.0, 11.5)	N	1.14
ANTELOPE VALLEY HOSP, LANCASTER	9	116741	0.8	(0.4, 1.5)	H	1.06
ARROYO GRANDE COMMUNITY HOSP	0	10013	0.0	(0.0, 3.0)	N	1.38
BAKERSFIELD HEART HOSP	0	15221	0.0	(0.0, 2.0)	N	1.84
BAKERSFIELD MEMORIAL HOSP	4	77378	0.5	(0.1, 1.3)	N	1.17
BANNER LASSEN MED CTR, SUSANVILLE	0	3739	0.0	(0.0, 8.0)	N	0.79
BARSTOW COMMUNITY HOSP	0	7845	0.0	(0.0, 3.8)	N	1.03
BARTON MEMORIAL HOSP, SOUTH LAKE TAHOE	0	8326	0.0	(0.0, 3.60)	N	1.11
BELLFLOWER MED CTR	0	26697	0.0	(0.0, 1.1)	N	0.80

Table 10. Incidence rates of hospital-onset vancomycin-resistant *Enterococci* bloodstream infections reported by California community hospitals, restricted to hospitals that reported at least ten months of data, April 1, 2010 through March 31, 2011 (inclusive).

Hospital licensee and/or campus name	Cases	Patient Days	Incidence Rate	95% Confidence Intervals	Compared To Pooled Mean**	Case Mix Index
BEVERLY HOSP, MONTEBELLO	1	38140	0.3	(0.0, 1.5)	N	1.15
BROTMAN MED CTR, CULVER CITY	0	36589	0.0	(0.0, 0.8)	N	1.19
CALIFORNIA HOSP MED CTR, LOS ANGELES	1	84888	0.1	(0.0, 0.7)	N	0.96
CALIFORNIA MENS COLONY, SAN LUIS OBISPO	0	12282	0.0	(0.0, 2.4)	N	
CALIFORNIA PACIFIC MED CTR, ST LUKE'S CAMPUS, SAN FRANCISCO	1	34885	0.3	(0.0, 1.6)	N	1.17
CASA COLINA HOSP FOR REHABILITATIVE MEDICINE, POMONA	0	21640	0.0	(0.0, 1.4)	N	1.17
CATALINA ISLAND MED CTR, AVALON	0	103	0.0	(0.0, 290.8)	N	0.88
† CATHOLIC HEALTHCARE WEST	0	55419	0.0	(0.0, 0.5)	N	
DOMINICAN HOSP CAMPUS #1, SANTA CRUZ						1.30
DOMINICAN HOSP CAMPUS #2, SANTA CRUZ						
† CATHOLIC HEALTHCARE WEST	1	59425	0.2	(0.0, 0.9)	N	
MERCY HOSP, BAKERSFIELD						1.16
MERCY SOUTHWEST HOSP, BAKERSFIELD						
CENTINELA HOSP MED CTR, INGLEWOOD	7	67688	1.0	(0.4, 2.1)	H	1.37
CENTRAL VALLEY GENERAL HOSP, HANFORD	1	12180	0.8	(0.0, 4.6)	N	0.68
CHAPMAN MED CTR, ORANGE	0	5116	0.0	(0.0, 5.9)	N	1.33
CHINO VALLEY MED CTR, CHINO	0	17569	0.0	(0.0, 1.7)	N	1.31
† CITRUS VALLEY MED CTR, INC.	7	128731	0.5	(0.2, 1.1)	N	
CITRUS VALLEY MED CTR, IC, COVINA						1.37
CITRUS VALLEY MED CTR, QV, WEST COVINA						1.01
CITY OF HOPE HELFORD CLINICAL RESEARCH HOSP, DUARTE	18	57353	3.1	(1.9, 5.0)	H	2.10
CLOVIS COMMUNITY MED CTR	0	38237	0.0	(0.0, 0.8)	N	0.91
COALINGA REGIONAL MED CTR	0	3633	0.0	(0.0, 8.2)	N	0.85

Table 10. Incidence rates of hospital-onset vancomycin-resistant *Enterococci* bloodstream infections reported by California community hospitals, restricted to hospitals that reported at least ten months of data, April 1, 2010 through March 31, 2011 (inclusive).

Hospital licensee and/or campus name	Cases	Patient Days	Incidence Rate	95% Confidence Intervals	Compared To Pooled Mean**	Case Mix Index
COAST PLAZA HOSP, NORWALK	0	13486	0.0	(0.0, 2.2)	N	1.11
COASTAL COMMUNITIES HOSP, SANTA ANA	0	23164	0.0	(0.0, 1.3)	N	0.90
COLLEGE HOSP COSTA MESA	0	37672	0.0	(0.0, 0.8)	N	0.84
COLORADO RIVER MED CTR, NEEDLES	0	1427	0.0	(0.0, 2.0)	N	0.77
COLUSA REG MED CTR	0	3338	0.0	(0.0, 9.0)	N	0.83
COMMUNITY HOSP OF LONG BEACH	1	11506	0.9	(0.0, 4.8)	N	1.12
COMMUNITY HOSP OF SAN BERNARDINO	1	85728	0.1	(0.0, 0.6)	N	0.93
COMMUNITY HOSP OF THE MONTEREY PENINSULA, MONTEREY	0	47630	0.0	(0.0, 0.6)	N	1.35
COMMUNITY MEMORIAL HOSP, SAN BUENAVENTURA, VENTURA	0	53593	0.0	(0.0, 0.6)	N	1.28
CONTRA COSTA REGIONAL MED CTR, MARTINEZ	0	44072	0.0	(0.0, 0.7)	N	0.91
† COUNTY OF VENTURA	3	53266	0.6	(0.1, 1.6)	N	
VENTURA COUNTY MED CTR						1.01
VENTURA COUNTY MED CTR, SANTA PAULA						
DAMERON HOSP, STOCKTON	2	47290	0.4	(0.1, 1.5)	N	1.18
DELANO REGIONAL MED CTR	0	21366	0.0	(0.0, 1.4)	N	0.96
DESERT REGIONAL MED CTR, PALM SPRINGS	1	72467	0.1	(0.0, 0.8)	N	1.23
DESERT VALLEY HOSP, VICTORVILLE	0	25587	0.0	(0.0, 1.2)	N	1.35
DOCTORS HOSP OF MANTECA	0	18208	0.0	(0.0, 1.7)	N	0.93
DOCTORS HOSP OF WEST COVINA*	0	658	0.0	(0.0, 45.5)	N	1.37
DOCTORS MED CTR, MODESTO	6	114266	0.5	(0.2, 1.1)	N	1.20
DOCTORS MED CTR, SAN PABLO	0	30945	0.0	(0.0, 1.0)	N	1.48
DOWNEY REGIONAL MED CTR	0	43736	0.0	(0.0, 0.7)	N	1.15
EAST LOS ANGELES DOCTORS HOSP	2	30316	0.7	(0.1, 2.4)	N	0.98
EAST VALLEY HOSP MED CTR, GLENDORA	0	8552	0.0	(0.0, 3.5)	N	1.06

Table 10. Incidence rates of hospital-onset vancomycin-resistant *Enterococci* bloodstream infections reported by California community hospitals, restricted to hospitals that reported at least ten months of data, April 1, 2010 through March 31, 2011 (inclusive).

Hospital licensee and/or campus name	Cases	Patient Days	Incidence Rate	95% Confidence Intervals	Compared To Pooled Mean**	Case Mix Index
EASTERN PLUMAS HEALTH CARE, PORTOLA	0	1143	0.0	(0.0, 26.2)	N	0.87
† EDEN MED CTR	1	58811	0.2	(0.0, 0.9)	N	
EDEN MED CTR, CASTRO VALLEY						1.31
SAN LEANDRO HOSP						1.42
EISENHOWER MED CTR, RANCHO MIRAGE	2	79330	0.3	(0.0, 0.9)	N	1.56
EL CENTRO REGIONAL MED CTR	0	25550	0.0	(0.0, 1.2)	N	1.00
EMANUEL MED CTR INC, TURLOCK	4	47137	0.9	(0.2, 2.2)	N	1.05
ENCINO HOSP MED CTR, ENCINO	0	21064	0.0	(0.0, 1.4)	N	1.43
† ENLOE MED CTR	0	71488	0.0	(0.0, 0.4)	N	
ENLOE MED CTR, ESPLANADE, CHICO						1.43
ENLOE REHABILITATION CTR, CHICO						
ENLOE MED CTR, COHASSET, CHICO						
FAIRCHILD MED CTR, YREKA	0	5082	0.0	(0.0, 5.9)	N	1.00
FAIRVIEW DEVELOPMENTAL CTR, COSTA MESA	0	544	0.0	(0.0, 55.1)	N	
FALLBROOK HOSP DISTRICT	0	8122	0.0	(0.0, 3.7)	N	1.00
FEATHER RIVER HOSP, PARADISE	0	22726	0.0	(0.0, 1.3)	N	1.16
FOOTHILL PRESBYTERIAN HSP-JOHNSTON MEMORIAL, GLENDORA	0	21955	0.0	(0.0, 1.4)	N	1.08
† FOUNTAIN VALLEY REGIONAL HOSP & MED CTR	0	90565	0.0	(0.0, 0.3)	N	
FOUNTAIN VALLEY REGIONAL HOSP						1.31
FOUNTAIN VALLEY REGIONAL HOSP						
† THE FREMONT-RIDEOUT HEALTH GROUP	1	49886	0.2	(0.0, 1.1)	N	
FREMONT MED CTR, YUBA CITY						0.79
RIDEOUT MEMORIAL HOSP, MARYSVILLE						1.22
FRANK R. HOWARD MEMORIAL HOSP, WILLITS	0	5581	0.0	(0.0, 5.4)	N	1.41
FRENCH HOSP MED CTR, SAN LUIS OBISPO	1	18110	0.6	(0.0, 3.1)	N	1.35

Table 10. Incidence rates of hospital-onset vancomycin-resistant *Enterococci* bloodstream infections reported by California community hospitals, restricted to hospitals that reported at least ten months of data, April 1, 2010 through March 31, 2011 (inclusive).

Hospital licensee and/or campus name	Cases	Patient Days	Incidence Rate	95% Confidence Intervals	Compared To Pooled Mean**	Case Mix Index
FRESNO HEART AND SURGICAL HOSP	0	10472	0.0	(0.0, 2.9)	N	2.01
FRESNO SURGICAL HOSP	0	4169	0.0	(0.0, 7.2)	N	1.92
GARDEN GROVE HOSP AND MED CTR	0	24976	0.0	(0.0, 1.2)	N	1.05
GARFIELD MED CTR, MONTEREY PARK	3	61194	0.5	(0.1, 1.4)	N	1.10
GEORGE L. MEE MEMORIAL HOSP, KING CITY	0	6089	0.0	(0.0, 4.9)	N	0.96
GLENDALE ADVENTIST MED CTR	2	110824	0.2	(0.0, 0.7)	N	1.21
GLENDALE MEMORIAL HOSP AND HEALTH CTR	1	60738	0.2	(0.0, 0.9)	N	1.36
GLENN MED CTR, WILLOWS	0	1156	0.0	(0.0, 25.9)	N	0.82
GOLETA VALLEY COTTAGE HOSP, SANTA BARBARA	0	15848	0.0	(0.0, 1.9)	N	1.47
† GOOD SAMARITAN HOSP, LP	2	89098	0.2	(0.0, 0.8)	N	
GOOD SAMARITAN HOSP, SAN JOSE						1.27
MISSION OAKS HOSP, LOS GATOS						
GOOD SAMARITAN HOSP, LOS ANGELES	3	72263	0.4	(0.1, 1.2)	N	1.22
GREATER EL MONTE COMMUNITY HOSP	0	14515	0.0	(0.0, 2.1)	N	0.98
GROSSMONT HOSP, LA MESA	4	121460	0.3	(0.1, 0.8)	N	1.26
HAZEL HAWKINS MEMORIAL HOSP, HOLLISTER	0	8248	0.0	(0.0, 3.6)	N	0.94
HEALDSBURG DISTRICT HOSP	0	4180	0.0	(0.0, 7.2)	N	1.25
HEALTHSOUTH TUSTIN REHABILITATION HOSP	0	15162	0.0	(0.0, 2.0	N	1.21
HEMET VALLEY MED CTR	0	44182	0.0	(0.0, 0.7)	N	1.11
HENRY MAYO NEWHALL MEMORIAL HOSP, VALENCIA	1	61978	0.2	(0.0, 0.9)	N	1.13
HI-DESERT MED CTR, JOSHUA TREE	0	11863	0.0	(0.0, 2.5)	N	0.99
‡ HOAG MEMORIAL HOSP PRESBYTERIAN, INC	7	131274	0.5	(0.2, 1.1)	N	
HOAG MEMORIAL HOSP PRESBYTERIAN, NEWPORT BEACH						1.34
HOAG HOSPITAL, IRVINE						
HOLLYWOOD COMMUNITY HOSP OF HOLLYWOOD	8	20751	3.9	(1.7, 7.6)	H	1.19

Table 10. Incidence rates of hospital-onset vancomycin-resistant *Enterococci* bloodstream infections reported by California community hospitals, restricted to hospitals that reported at least ten months of data, April 1, 2010 through March 31, 2011 (inclusive).

Hospital licensee and/or campus name	Cases	Patient Days	Incidence Rate	95% Confidence Intervals	Compared To Pooled Mean**	Case Mix Index
HOLLYWOOD PRESBYTERIAN MED CTR, LOS ANGELES	7	76400	0.9	(0.4, 1.9)	H	1.04
‡ HOSPITAL COMMITTEE AREA LIVERMORE PLEASANTON VALLEY MEMORIAL HOSPITAL, LIVERMORE VALLEYCARE MEDICAL CENTER, PLEASANTON	0	32661	0.0	(0.0, 0.9)	N	1.28
HUNTINGTON BEACH HOSP	3	15786	1.9	(0.4, 5.6)	H	1.38
HUNTINGTON MEMORIAL HOSP, PASADENA	3	137160	0.2	(0.0, 0.6)	N	1.27
JEROLD PHELPS COMMUNITY HOSP, GARBERVILLE**	0	83	0.0	(0.0, 360.9)	N	0.90
JOHN C. FREMONT HEALTHCARE DISTRICT, MARIPOSA	0	704	0.0	(0.0, 42.6)	N	0.94
JOHN F. KENNEDY MEMORIAL HOSP, INDIO	0	31053	0.0	(0.0, 1.0)	N	0.97
JOHN MUIR MED CTR, CONCORD	2	45808	0.4	(0.1, 1.6)	N	1.73
JOHN MUIR MED CTR, WALNUT CREEK	1	86030	0.1	(0.0, 0.6)	N	1.39
KAISER FOUNDATION HOSP & REHAB. CTR, VALLEJO	0	64393	0.0	(0.0, 0.5)	N	1.14
KAISER FOUNDATION HOSP, ANTIOCH	1	34560	0.3	(0.0, 1.6)	N	1.20
KAISER FOUNDATION HOSP, BALDWIN PARK	2	48418	0.4	(0.1, 1.5)	N	1.10
KAISER FOUNDATION HOSP-DOWNEY, BELLFLOWER	0	80610	0.0	(0.0, 0.4)	N	1.10
KAISER FOUNDATION HOSP, FONTANA	8	123454	0.7	(0.3, 1.3)	N	1.18
KAISER FOUNDATION HOSP, FRESNO	0	30056	0.0	(0.0, 1.0)	N	1.24
KAISER FOUNDATION HOSP, MORENO VALLEY	1	20096	0.5	(0.0, 2.8)	N	0.81
KAISER FOUNDATION HOSP, PANORAMA CITY	3	44240	0.7	(0.1, 2.0)	N	1.10
KAISER FOUNDATION HOSP, REDWOOD CITY**	2	32465	0.6	(0.1, 2.2)	N	1.40
KAISER FOUNDATION HOSP, RIVERSIDE	0	55089	0.0	(0.0, 0.5)	N	1.10
KAISER FOUNDATION HOSP, SAN DIEGO	5	112969	0.4	(0.1, 1.0)	N	1.17
KAISER FOUNDATION HOSP, SAN FRANCISCO	3	101664	0.3	(0.1, 0.9)	N	1.40

Table 10. Incidence rates of hospital-onset vancomycin-resistant *Enterococci* bloodstream infections reported by California community hospitals, restricted to hospitals that reported at least ten months of data, April 1, 2010 through March 31, 2011 (inclusive).

Hospital licensee and/or campus name	Cases	Patient Days	Incidence Rate	95% Confidence Intervals	Compared To Pooled Mean**	Case Mix Index
KAISER FOUNDATION HOSP, SAN JOSE	0	51310	0.0	(0.0, 0.6)	N	1.20
KAISER FOUNDATION HOSP, SAN RAFAEL**	0	20351	0.0	(0.0, 1.5)	N	1.30
KAISER FOUNDATION HOSP, SANTA CLARA	0	110524	0.0	(0.0, 0.3)	N	1.36
KAISER FOUNDATION HOSP, SANTA ROSA	0	32225	0.0	(0.0, 0.9)	N	1.16
KAISER FOUNDATION HOSP, SOUTH BAY, HARBOR CITY	1	57876	0.2	(0.0, 1.0)	N	1.18
KAISER FOUNDATION HOSP, SOUTH SACRAMENTO	3	46692	0.6	(0.1, 1.9)	N	1.17
KAISER FOUNDATION HOSP, SOUTH SAN FRANCISCO	1	26858	0.4	(0.0, 2.1)	N	1.48
KAISER FOUNDATION HOSP, SUNSET, LOS ANGELES	5	111102	0.5	(0.1, 1.1)	N	1.61
KAISER FOUNDATION HOSP, VACAVILLE	0	14573	0.0	(0.0, 2.1)	N	1.25
KAISER FOUNDATION HOSP, WALNUT CREEK	2	69835	0.3	(0.0, 1.0)	N	1.18
KAISER FOUNDATION HOSP, WEST LA, LOS ANGELES	0	47640	0.0	(0.0, 0.6)	N	1.17
KAISER FOUNDATION HOSP, WOODLAND HILLS	1	53253	0.2	(0.0, 1.1)	N	1.30
‡ KAISER FOUNDATION HOSP						
KAISER FOUNDATION HOSP, ANAHEIM	0	53089	0.0	(0.0, 0.6)	N	1.15
KAISER FOUNDATION HOSP, IRVINE	0	46073	0.0	(0.0, 0.7)	N	
† KAISER FOUNDATION HOSPS	0	57651	0.0	(0.0, 0.5)	N	
KAISER FOUNDATION HOSP, FREMONT						
KAISER FOUNDATION HOSP, HAYWARD						
† KAISER FOUNDATION HOSPS	0	37955	0.0	(0.0, 0.8)	N	
KAISER FOUNDATION HOSP, MANTECA KAISER FOUNDATION HOSP, MODESTO						1.08
‡ KAISER FOUNDATION HOSPS						
KAISER FOUNDATION HOSP- ROSEVILLE	0	91178	0.0	(0.0, 0.3)	N	
KAISER FOUNDATION HOSP- SACRAMENTO	2	53139	0.4	(0.0, 1.4)	N	1.31

Table 10. Incidence rates of hospital-onset vancomycin-resistant *Enterococci* bloodstream infections reported by California community hospitals, restricted to hospitals that reported at least ten months of data, April 1, 2010 through March 31, 2011 (inclusive).

Hospital licensee and/or campus name	Cases	Patient Days	Incidence Rate	95% Confidence Intervals	Compared To Pooled Mean**	Case Mix Index
† KAISER FOUNDATION HOSPS	2	89113	0.2	(0.0, 0.8)	N	
KAISER FOUNDATION HOSP, OAKLAND						1.38
KAISER FOUNDATION HOSP, RICHMOND						
† KARYKEION, INC	0	11744	0.0	(0.0, 2.6)	N	
COMMUNITY AND MISSION HOSP OF HUNTINGTON PARK CAMPUS#1						0.91
COMMUNITY AND MISSION HOSP OF HUNTINGTON PARK CAMPUS #2						
KAWEAH DELTA MED CTR, VISALIA	7	136882	0.5	(0.2, 1.1)	N	1.23
KERN MED CTR, BAKERSFIELD	1	34558	0.3	(0.0, 1.6)	N	0.95
KERN VALLEY HEALTHCARE DISTRICT, LAKE ISABELLA	0	3961	0.0	(0.0, 7.6)	N	1.06
LA PALMA INTERCOMMUNITY HOSP	1	17728	0.6	(0.0, 3.1)	N	1.11
LAGUNA HONDA HOSP & REHAB CTR, SAN FRANCISCO	0	1828	0.0	(0.0, 16.4)	N	1.21
LAKEWOOD REGIONAL MED CTR	4	39727	1.0	(0.3, 2.6)	N	1.53
LANTERMAN DEVELOPMENTAL CTR, POMONA	0	1213	0.0	(0.0, 24.7)	N	
† LODI MEMORIAL HOSP ASSOCIATION, INC.	0	34875	0.0	(0.0, 0.9)	N	
LODI MEMORIAL HOSP (1RH)						1.01
LODI MEMORIAL HOSP-WEST						
LOMPOC VALLEY MED CTR	0	9025	0.0	(0.0, 3.3)	N	0.99
LONG BEACH MEMORIAL MED CTR, LONG BEACH	8	104369	0.8	(0.3, 1.5)	N	1.43
LOS ALAMITOS MED CTR	0	48982	0.0	(0.0, 0.6)	N	1.07
LOS ANGELES METROPOLITAN MED CTR	1	36817	0.3	(0.0, 1.5)	N	0.91

Table 10. Incidence rates of hospital-onset vancomycin-resistant *Enterococci* bloodstream infections reported by California community hospitals, restricted to hospitals that reported at least ten months of data, April 1, 2010 through March 31, 2011 (inclusive).

Hospital licensee and/or campus name	Cases	Patient Days	Incidence Rate	95% Confidence Intervals	Compared To Pooled Mean**	Case Mix Index
† LOS ROBLES REGIONAL MED CTR	3	83840	0.4	(0.1, 1.0)	N	
LOS ROBLES HOSP, E, THOUSAND OAKS						
LOS ROBLES HOSP, THOUSAND OAKS						1.38
MAD RIVER COMMUNITY HOSP, ARCATA	0	8393	0.0	(0.0, 3.6)	N	0.93
MADERA COMMUNITY HOSP	0	26867	0.0	(0.0, 1.1)	N	0.82
MAMMOTH HOSP	0	1848	0.0	(0.0, 16.2)	N	1.12
MARIAN MED CTR, SANTA MARIA	2	39403	0.5	(0.1, 1.8)	N	1.09
MARIN GENERAL HOSP, GREENBRAE	1	44600	0.2	(0.0, 1.2)	N	1.25
MARINA DEL REY HOSP	2	17027	1.2	(0.1, 4.2)	N	1.75
MARK TWAIN ST JOSEPH'S HOSP, SAN ANDREAS	0	5242	0.0	(0.0, 5.7)	N	1.12
MARSHALL MED CTR (1-RH), PLACERVILLE	0	22129	0.0	(0.0, 1.4)	N	1.25
MAYERS MEMORIAL HOSP, FALL RIVER MILLS	0	1568	0.0	(0.0, 19.1)	N	0.79
MEMORIAL HOSP LOS BANOS	0	6176	0.0	(0.0, 4.9)	N	0.69
MEMORIAL HOSP OF GARDENA	2	28528	0.7	(0.1, 2.5)	N	1.18
MEMORIAL MED CTR, MODESTO	0	101449	0.0	(0.0, 0.3)	N	1.35
MENDOCINO COAST DISTRICT HOSP, FORT BRAGG	0	4977	0.0	(0.0, 6.0)	N	1.06
MENIFEE VALLEY MED CTR, SUN CITY	1	16776	0.6	(0.0, 3.3)	N	1.23
MERCY GENERAL HOSP, SACRAMENTO	1	84160	0.1	(0.0, 0.7)	N	1.58
MERCY HOSP OF FOLSOM	0	20249	0.0	(0.0, 1.5)	N	1.05
MERCY MED CTR MERCED	3	56382	0.5	(0.1, 1.6)	N	1.00
MERCY MED CTR MT. SHASTA	0	3613	0.0	(0.0, 8.3)	N	1.18
MERCY MED CTR REDDING	0	57576	0.0	(0.0, 0.5)	N	1.46
MERCY SAN JUAN MED CTR, CARMICHAEL	1	95034	0.1	(0.0, 0.6)	N	1.28
METHODIST HOSP OF SACRAMENTO	0	33967	0.0	(0.0, 0.9)	N	1.17
METHODIST HOSP OF SOUTHERN CA, ARCADIA	2	88262	0.2	(0.0, 0.8)	N	1.28

Table 10. Incidence rates of hospital-onset vancomycin-resistant *Enterococci* bloodstream infections reported by California community hospitals, restricted to hospitals that reported at least ten months of data, April 1, 2010 through March 31, 2011 (inclusive).

Hospital licensee and/or campus name	Cases	Patient Days	Incidence Rate	95% Confidence Intervals	Compared To Pooled Mean**	Case Mix Index
† MILLS-PENINSULA HEALTH SERVICES	0	59252	0.0	(0.0, 0.5)	N	
MILLS HEALTH CTR, SAN MATEO						
PENINSULA MED CTR, BURLINGAME						1.23
MIRACLE MILE MED CTR, LOS ANGELES	0	805	0.0	(0.0, 37.2)	N	3.08
MISSION COMMUNITY HOSP, PANORAMA	0	15204	0.0	(0.0, 2.0)	N	1.15
† MISSION HOSP REGIONAL MED CTR	0	76599	0.0	(0.0, 0.4)	N	
MISSION HOSP REGIONAL MED CTR						
MISSION HOSP LAGUNA BEACH						1.22
MODOC MED CTR, ALTURAS	0	1614	0.0	(0.0, 18.6)	N	0.97
MONTEREY PARK HOSP	0	16516	0.0	(0.0, 1.8)	N	0.83
MOTION PICTURE & TELEVISION HOSP, WOODLAND HILLS	0	1229	0.0	(0.0, 24.4)	N	0.94
MOUNTAINS COMMUNITY HOSP, LAKE ARROWHEAD	0	762	0.0	(0.0, 39.3)	N	0.87
NATIVIDAD MED CTR, SALINAS	1	39404	0.3	(0.0, 1.4)	N	0.86
‡ NORTHBAY HEALTHCARE GROUP						
NORTHBAY MED CTR, FAIRFIELD	3	26479	1.1	(0.2, 3.3)	N	1.17
NORTHBAY VACAVALLEY HOSP	1	12570	0.8	(0.0, 4.4)	N	1.36
NORTHERN INYO HOSP, BISHOP	0	2988	0.0	(0.0, 10.0)	N	0.98
NORTHRIDGE HOSP MED CTR	8	87859	0.9	(0.4, 1.8)	H	1.23
NOVATO COMMUNITY HOSP	0	5986	0.0	(0.0, 5.0)	N	1.54
O'CONNOR HOSP, SAN JOSE	3	55094	0.5	(0.1, 1.6)	N	1.09
OAK VALLEY HOSP DISTRICT (2-RH), OAKDALE	0	4676	0.0	(0.0, 6.4)	N	0.96
OJAI VALLEY COMMUNITY HOSP, OJAI	0	2790	0.0	(0.0, 10.7)	N	1.21
OLYMPIA MED CTR, LOS ANGELES	19	34885	5.5	(3.3, 8.5)	H	1.50
ORANGE COAST MEMORIAL MED CTR, FOUNTAIN VALLEY	0	44901	0.0	(0.0, 0.7)	N	1.13

Table 10. Incidence rates of hospital-onset vancomycin-resistant *Enterococci* bloodstream infections reported by California community hospitals, restricted to hospitals that reported at least ten months of data, April 1, 2010 through March 31, 2011 (inclusive).

Hospital licensee and/or campus name	Cases	Patient Days	Incidence Rate	95% Confidence Intervals	Compared To Pooled Mean**	Case Mix Index
OROVILLE HOSP	0	38199	0.0	(0.0, 0.8)	N	1.14
PACIFIC ALLIANCE MED CTR	0	30532	0.0	(0.0, 1.0)	N	0.87
PACIFIC HOSP OF LONG BEACH	0	42348	0.0	(0.0, 0.7)	N	1.12
PALM DRIVE HOSP, SEBASTOPOL	0	4434	0.0	(0.0, 6.8)	N	1.55
PALMDALE REGIONAL MEDICAL CTR	1	26278	0.4	(0.0, 2.1)	N	
PALO VERDE HOSP, BLYTHE	0	5253	0.0	(0.0, 5.7)	N	0.87
PALOMAR MED CTR, ESCONDIDO	2	85224	0.2	(0.0, 0.8)	N	1.17
PARADISE VALLEY HOSP, NATIONAL CITY	1	49184	0.2	(0.0, 1.1)	N	1.06
PARKVIEW COMMUNITY HOSP MED CTR, RIVERSIDE	1	39709	0.3	(0.0, 1.4)	N	1.00
PATIENTS' HOSP OF REDDING	0	553	0.0	(0.0, 54.2)	N	1.25
PETALUMA VALLEY HOSP, PETALUMA	0	9869	0.0	(0.0, 3.0)	N	1.16
PLACENTIA LINDA HOSP	0	14143	0.0	(0.0, 2.1)	N	1.23
PLUMAS DISTRICT HOSP, QUINCY	0	2251	0.0	(0.0, 13.3)	N	0.92
POMERADO HOSP, POWAY	0	28496	0.0	(0.0, 1.1)	N	1.16
POMONA VALLEY HOSP MED CTR, POMONA	5	117381	0.4	(0.1, 1.0)	N	1.14
PORTERVILLE DEVELOPMENTAL CTR	0	1377	0.0	(0.0, 21.8)	N	
PRESBYTERIAN INTERCOMMUNITY HOSP, WHITTIER	0	75811	0.0	(0.0, 0.4)	N	1.29
PROVIDENCE HOLY CROSS MED CTR, MISSION HILLS	7	90372	0.8	(0.3, 1.6)	N	1.32
PROVIDENCE LITTLE COMPANY OF MARY MED CTR, SAN PEDRO	0	39064	0.0	(0.0, 0.8)	N	1.06
PROVIDENCE LITTLE COMPANY OF MARY MED CTR, TORRANCE	1	75075	0.1	(0.0, 0.7)	N	1.13
PROVIDENCE SAINT JOSEPH MED CTR, BURBANK	11	97497	1.1	(0.6, 2.0)	H	1.34
PROVIDENCE TARZANA MED CTR, TARZANA	5	64028	0.8	(0.3, 1.8)	N	1.26
QUEEN OF THE VALLEY MED CTR, NAPA	2	40524	0.5	(0.1, 1.8)	N	1.43
REDLANDS COMMUNITY HOSP	2	50430	0.4	(0.0, 1.4)	N	1.12

Table 10. Incidence rates of hospital-onset vancomycin-resistant *Enterococci* bloodstream infections reported by California community hospitals, restricted to hospitals that reported at least ten months of data, April 1, 2010 through March 31, 2011 (inclusive).

Hospital licensee and/or campus name	Cases	Patient Days	Incidence Rate	95% Confidence Intervals	Compared To Pooled Mean**	Case Mix Index
REDWOOD MEMORIAL HOSP, FORTUNA	0	6283	0.0	(0.0, 4.8)	N	0.99
RIDGECREST REGIONAL HOSP	0	12400	0.0	(0.0, 2.4)	N	1.02
RIVERSIDE COMMUNITY HOSP	4	97750	0.4	(0.1, 1.0)	N	1.35
† SADDLEBACK MEMORIAL MED CTR	1	67825	0.2	(0.0, 0.8)	N	
SADDLEBACK MEMORIAL MED CTR						1.26
SADDLEBACK MEMORIAL MED CTR, SAN CLEMENTE						
SAINT AGNES MED CTR, FRESNO	8	107300	0.8	(0.3, 1.5)	N	1.26
SAINT FRANCIS MED CTR, LYNWOOD	9	112935	0.8	(0.4, 1.5)	H	1.01
SAINT FRANCIS MEMORIAL HOSP, SAN FRANCISCO	3	31049	1.0	(0.2, 2.8)	N	1.44
SAINT JOHN'S HEALTH CTR, SANTA MONICA	2	58234	0.3	(0.0, 1.2)	N	1.50
SAINT LOUISE REGIONAL HOSP, GILROY	0	13033	0.0	(0.0, 2.3)	N	1.08
SAINT VINCENT MED CTR, LOS ANGELES	7	42848	1.6	(0.7, 3.4)	H	1.63
SALINAS VALLEY MEMORIAL HOSP	0	48479	0.0	(0.0, 0.6)	N	1.28
SAN ANTONIO COMMUNITY HOSP, UPLAND	4	60532	0.7	(0.2, 1.7)	N	1.29
SAN DIMAS COMMUNITY HOSP	0	13467	0.0	(0.0, 2.2)	N	1.13
SAN GABRIEL VALLEY MED CTR, SAN GABRIEL	1	35858	0.3	(0.0, 1.6)	N	1.10
SAN GORGONIO MEMORIAL HOSP, BANNING	1	12832	0.8	(0.0, 4.3)	N	1.05
SAN JOAQUIN COMMUNITY HOSP, BAKERSFIELD	0	72699	0.0	(0.0, 0.4)	N	1.24
SAN JOAQUIN GENERAL HOSP, FRENCH P	1	42992	0.2	(0.0, 1.3)	N	1.03
SAN JOAQUIN VALLEY REHAB HOSP, FRESNO	0	16992	0.0	(0.0, 1.8)	N	1.20
SAN MATEO MED CTR	2	21007	1.0	(0.1, 3.4)	N	1.19
† SAN RAMON REGIONAL MED CTR, INC.	0	19043	0.0	(0.0, 1.6)	N	
SAN RAMON REGIONAL MED CTR						1.30
SAN RAMON REGIONAL MED CTR SOUTH						
SANTA BARBARA COTTAGE HOSP	1	84018	0.1	(0.0, 0.7)	N	1.31

Table 10. Incidence rates of hospital-onset vancomycin-resistant *Enterococci* bloodstream infections reported by California community hospitals, restricted to hospitals that reported at least ten months of data, April 1, 2010 through March 31, 2011 (inclusive).

Hospital licensee and/or campus name	Cases	Patient Days	Incidence Rate	95% Confidence Intervals	Compared To Pooled Mean**	Case Mix Index
SANTA ROSA MEMORIAL HOSP	0	60755	0.0	(0.0, 0.5)	N	1.54
SANTA YNEZ VALLEY COTTAGE HOSP, SOLVANG	0	1030	0.0	(0.0, 29.1)	N	0.97
SCRIPPS GREEN HOSP, LA JOLLA	1	41783	0.2	(0.0, 1.3)	N	1.85
SCRIPPS MEMORIAL HOSP, ENCINITAS	0	44779	0.0	(0.0, 0.7)	N	1.19
SCRIPPS MEMORIAL HOSP, LA JOLLA	0	72700	0.0	(0.0, 0.4)	N	1.34
SENECA HEALTHCARE DISTRICT, CHESTER	0	812	0.0	(0.0, 36.9)	N	0.89
SEQUOIA HOSP, REDWOOD CITY	1	30993	0.3	(0.0, 1.8)	N	1.28
SHARP CHULA VISTA MED CTR	1	73531	0.1	(0.0, 0.8)	N	1.21
SHARP CORONADO HOSP AND HEALTHCARE CTR	0	9558	0.0	(0.0, 3.1)	N	1.72
SHARP MARY BIRCH FOR WOMEN & NEWBORNS, SAN DIEGO	0	70470	0.0	(0.0, 0.4)	N	0.70
SHARP MEMORIAL HOSP, SAN DIEGO	4	97219	0.4	(0.1, 1.1)	N	1.25
SHASTA REGIONAL MED CTR, REDDING	1	31670	0.3	(0.0, 1.8)	N	1.63
SHERMAN OAKS HOSP	4	17767	2.3	(0.6, 5.8)	H	1.60
SIERRA KINGS DISTRICT HOSP, REEDLEY	0	6443	0.0	(0.0, 4.6)	N	0.64
SIERRA NEVADA MEMORIAL HOSP, GRASS VALLEY	0	18122	0.0	(0.0, 1.7)	N	1.15
SIERRA VIEW DISTRICT HOSP, PORTERVILLE	0	34568	0.0	(0.0, 0.9)	N	1.01
SIERRA VISTA REGIONAL MED CTR, SAN LUIS OBISPO	0	28048	0.0	(0.0, 1.1)	N	1.15
SILVER LAKE MED CTR, LOS ANGELES	0	22104	0.0	(0.0, 1.4)	N	1.13
SIMI VALLEY HOSP & HEALTH CARE SERVICES	3	31055	1.0	(0.2, 2.8)	N	1.23
SONOMA DEVELOPMENTAL CTR, ELDRIDGE	0	902	0.0	(0.0, 33.2)	N	
SONOMA VALLEY HOSP	0	5646	0.0	(0.0, 5.3)	N	1.19
‡ SONORA REGIONAL MED CTR	0	21104	0.0	(0.0, 1.4)	N	
SONORA REGIONAL MED CTR CAMPUS #1						1.26
SONORA REGIONAL MED CTR CAMPUS #2						
ST BERNARDINE MED CTR	2	74502	0.3	(0.0, 1.0)	N	1.56

Table 10. Incidence rates of hospital-onset vancomycin-resistant *Enterococci* bloodstream infections reported by California community hospitals, restricted to hospitals that reported at least ten months of data, April 1, 2010 through March 31, 2011 (inclusive).

Hospital licensee and/or campus name	Cases	Patient Days	Incidence Rate	95% Confidence Intervals	Compared To Pooled Mean**	Case Mix Index
ST ELIZABETH COMMUNITY HOSP, RED BLUFF	0	9950	0.0	(0.0, 3.0)	N	1.02
ST HELENA HOSP, CLEARLAKE	0	7097	0.0	(0.0, 4.2)	N	0.89
ST HELENA HOSP, ST HELENA	2	19451	1.0	(0.1, 3.7)	N	1.47
ST JOHN'S PLEASANT VALLEY HOSP, ARILLO	0	15395	0.0	(0.0, 1.9)	N	1.33
ST JOHN'S REGIONAL MED CTR, OXNARD	1	58314	0.2	(0.0, 1.0)	N	1.28
‡ ST JOSEPH HOSP EUREKA						
ST JOSEPH HOSP, EUREKA	1	29569	0.3	(0.0, 1.9)	N	1.44
THE GENERAL HOSP, EUREKA	0	2490	0.0	(0.0, 12.0)	N	
ST JOSEPH HOSP, ORANGE	7	87552	0.8	(0.3, 1.6)	N	1.37
ST JOSEPH'S MED CTR OF STOCKTON	0	88317	0.0	(0.0, 0.3)	N	1.32
ST JUDE MED CTR, FULLERTON	5	75678	0.7	(0.2, 1.5)	N	1.37
ST MARY MED CTR, APPLE VALLEY	0	67945	0.0	(0.0, 0.4)	N	1.17
ST MARY MED CTR, LONG BEACH	0	64386	0.0	(0.0, 0.5)	N	1.09
ST MARY'S MED CTR, SAN FRANCISCO	0	36631	0.0	(0.0, 0.8)	N	1.56
ST ROSE HOSP, HAYWARD	0	45163	0.0	(0.0, 0.7)	N	1.18
STANISLAUS SURGICAL HOSP, MODESTO	0	2311	0.0	(0.0, 13.0)	N	1.67
SURPRISE VALLEY COMMUNITY HOSP, CEDARVILLE	0	82	0.0	(0.0, 365.3)	N	0.80
SUTTER AMADOR HOSP, JACKSON	0	7512	0.0	(0.0, 4.0)	N	1.02
SUTTER AUBURN FAITH HOSP, AUBURN	0	14790	0.0	(0.0, 2.0)	N	1.34
SUTTER COAST HOSP, CRESCENT CITY	0	8164	0.0	(0.0, 3.7)	N	1.09
SUTTER DAVIS HOSPITAL, DAVIS	0	11365	0.0	(0.0, 2.6)	N	0.89
SUTTER DELTA MED CTR, ANTIOCH	3	32992	0.9	(0.2, 2.7)	N	1.13

Table 10. Incidence rates of hospital-onset vancomycin-resistant *Enterococci* bloodstream infections reported by California community hospitals, restricted to hospitals that reported at least ten months of data, April 1, 2010 through March 31, 2011 (inclusive).

Hospital licensee and/or campus name	Cases	Patient Days	Incidence Rate	95% Confidence Intervals	Compared To Pooled Mean**	Case Mix Index
† SUTTER EAST BAY HOSPS CTR	11	221833	0.5	(0.2, 0.9)	N	
ALTA BATES SUMMIT MED CTR, ALTA BATES CAMPUS, BERKELEY						0.96
ALTA BATES SUMMIT MED CTR, HERRICK CAMPUS, BERKELEY						0.94
ALTA BATES SUMMIT MED CTR, SUMMIT CAMPUS #1, OAKLAND						1.78
ALTA BATES SUMMIT MED CTR, SUMMIT CAMPUS #2, OAKLAND						
† SUTTER HEALTH SACRAMENTO SIERRA REGION	8	137657	0.6	(0.3, 1.1)	N	
SUTTER GENERAL HOSP, SACRAMENTO						1.64
SUTTER MEMORIAL HOSP, SACRAMENTO						1.27
SUTTER LAKESIDE HOSP, LAKEPORT	0	7184	0.0	(0.0, 4.2)	N	1.17
SUTTER MATERNITY & SURGERY CTR OF SANTA CRUZ	0	4305	0.0	(0.0, 7.0)	N	0.82
SUTTER MED CTR OF SANTA ROSA	2	24332	0.8	(0.1, 3.0)	N	1.20
SUTTER ROSEVILLE MED CTR	0	60545	0.0	(0.0, 0.5)	N	1.24
SUTTER SOLANO MED CTR, VALLEJO	2	21094	1.0	(0.1, 3.4)	N	1.20
SUTTER SURGICAL HOSP, NORTH VALLEY, YUBA CITY	0	1664	0.0	(0.0, 18.0)	N	1.57
SUTTER TRACY COMMUNITY HOSP, TRACY	0	16950	0.0	(0.0, 1.8)	N	0.99
† SUTTER WEST BAY HOSPS	5	176801	0.3	(0.1, 0.7)	N	
CALIFORNIA PACIFIC MED CTR, CA WEST						
CALIFORNIA PACIFIC MED CTR, DAVIES CAM HOSP, SAN FRANCISCO						
CALIFORNIA PACIFIC MED CTR, PACIFIC CAM HOSP, SAN FRANCISCO						1.31
TAHOE FOREST HOSP, TRUCKEE	0	6108	0.0	(0.0, 4.9)	N	1.04

Table 10. Incidence rates of hospital-onset vancomycin-resistant *Enterococci* bloodstream infections reported by California community hospitals, restricted to hospitals that reported at least ten months of data, April 1, 2010 through March 31, 2011 (inclusive).

Hospital licensee and/or campus name	Cases	Patient Days	Incidence Rate	95% Confidence Intervals	Compared To Pooled Mean**	Case Mix Index
TEHACHAPI HOSP, TEHACHAPI	0	533	0.0	(0.0, 56.2)	N	0.82
TEMPLE COMMUNITY HOSP, LOS ANGELES	2	15958	1.3	(0.2, 4.5)	N	1.10
THOUSAND OAKS SURGICAL HOSP	0	2579	0.0	(0.0, 11.6)	N	1.59
TORRANCE MEMORIAL MED CTR, TORRANCE	2	93420	0.2	(0.0, 0.8)	N	1.24
TRI-CITY MED CTR, OCEANSIDE	2	65786	0.3	(0.0, 1.1)	N	1.20
TRI-CITY REGIONAL MED CTR, HAWAIIAN GARDENS	0	15842	0.0	(0.0, 1.9)	N	1.67
TRINITY HOSP, WEAVERVILLE	0	2186	0.0	(0.0, 13.7)	N	0.95
TULARE REGIONAL MEDICAL CTR	0	24411	0.0	(0.0, 1.2)	N	0.87
TWIN CITIES COMMUNITY HOSP, TEMPLETON	0	32278	0.0	(0.0, 0.9)	N	1.03
† UHS-CORONA, INC.	1	52393	0.2	(0.0, 1.1)	N	
CORONA REGIONAL MED CTR, CAMPUS #1						1.01
CORONA REGIONAL MED CTR, CAMPUS #2						
UKIAH VALLEY MED CTR/HOSP DRIVE, UKIAH	0	12099	0.0	(0.0, 2.5)	N	1.03
† UNIVERSAL HEALTH SERVICES OF RANCHO SPRINGS, INC.	0	65400	0.0	(0.0, 0.5)	N	
SOUTHWEST HEALTHCARE SYSTEMS, MURRIETA						1.01
SOUTHWEST HEALTHCARE SYSTEMS, WILDOMAR						
VALLEY PRESBYTERIAN HOSP, VAN NUYS	3	74284	0.4	(0.1, 1.2)	N	1.05
VERDUGO HILLS HOSP, GLENDALE	0	28710	0.0	(0.0, 1.0)	N	1.09
VICTOR VALLEY COMMUNITY HOSP, VICTORVILLE	2	22607	0.9	(0.1, 3.2)	N	0.96
WASHINGTON HOSP, FREMONT	3	63992	0.5	(0.1, 1.4)	N	1.28
WATSONVILLE COMMUNITY HOSP	0	20445	0.0	(0.0, 1.5)	N	1.02
WEST ANAHEIM MED CTR, ANAHEIM**	3	30793	1.0	(0.2, 2.8)	N	1.57
WEST HILLS HOSP AND MED CTR	0	41745	0.0	(0.0, 0.7)	N	1.29
WESTERN MED CTR ANAHEIM	1	41680	0.2	(0.0, 1.3)	N	0.84

Table 10. Incidence rates of hospital-onset vancomycin-resistant *Enterococci* bloodstream infections reported by California community hospitals, restricted to hospitals that reported at least ten months of data, April 1, 2010 through March 31, 2011 (inclusive).

Hospital licensee and/or campus name	Cases	Patient Days	Incidence Rate	95% Confidence Intervals	Compared To Pooled Mean**	Case Mix Index
WESTERN MED CTR SANTA ANA	1	38915	0.3	(0.0, 1.4)	N	1.24
WHITE MEMORIAL MED CTR, LOS ANGELES	7	102743	0.7	(0.3, 1.4)	N	1.10
WHITTIER HOSP MED CTR	0	30021	0.0	(0.0, 1.0)	N	0.92
WOODLAND MEMORIAL HOSP	0	10521	0.0	(0.0, 2.8)	N	1.08

*Reported 11 months of data; all other hospitals reported 12 months of data.

**Incidence rate for hospital compared to pooled mean using 95% confidence intervals: N = no different, H = significantly higher, L = significantly lower than pooled mean.

*** Mean of all hospitals case mix indices

† Hospital reported infection data aggregated over all acute care campuses

‡ Hospital reported infection data separately by acute care campus

Notes: Rate per 10,000 patient days; 95% confidence interval calculated based on exact Poisson distribution; case mix index was available and listed for most but not all acute care campuses

Source: Methicillin-Resistant *Staphylococcus aureus* and Vancomycin-Resistant *Enterococcus* Bloodstream Infections In California General Acute Care Hospitals, April 2010 Through March 2011

Table 11. Months reported and cases of hospital-onset methicillin-resistant *Staphylococcus aureus* and vancomycin-resistant *Enterococci* bloodstream infections reported by California acute care hospitals, reporting less than ten months of data, April 1, 2010 - March 31, 2011.

Facility Name (Category)	Hospital Type	Months Reported	MRSA Cases	VRE Cases	Patient Days
BARLOW RESPIRATORY HOSPITAL	LTAC*	3	0	0	5707
BEAR VALLEY COMMUNITY HOSP, BIG BEAR LAKE	Community	9	0	0	695
BIGGS GRIDLEY MEMORIAL HOSP, GRIDLEY	Community	0			
CALIFORNIA MEDICAL FACILITY	Community	8	0	0	1408
CHINESE HOSPITAL	Community	4	0	0	3831
CORCORAN DISTRICT HOSPITAL	Community	2	0	0	275
EL CAMINO HOSP, LOS GATOS	Community	9	0	0	8418
EL CAMINO HOSP, MOUNTAIN VIEW	Community	9	0	1	52141
GOOD SAMARITAN HOSP. BAKERSFIELD	Community	0			
HEALTHSOUTH BAKERSFIELD REHABILITATION HOSPITAL	Community	6	0	0	8785
JOHN D KLARICH MEMORIAL HOSPITAL	Community	6	0	0	11815
MENLO PARK SURGICAL HOSPITAL	Community	0			
MONTCLAIR HOSPITAL MEDICAL CENTER	Community	3	0	0	4386
PACIFICA HOSPITAL OF THE VALLEY	Community	7	0	0	14632
PIONEERS MEMORIAL HEALTHCARE DISTRICT, BRAWLEY	Community	9	1	0	38656
PROMISE HOSPITAL - SAN DIEGO	LTAC	8	2	2	10333
RANCHO LOS AMIGOS NATIONAL REHABILITATION CENTER	Community	6	0	0	33838
RANCHO SPECIALTY HOSP, RANCHO CUCAMONGA	LTAC	9	0	0	13940
SETON MEDICAL CENTER	Community	2	1	1	7225
REGIONAL MEDICAL CENTER OF SAN JOSE	Community	2	0	0	12310
SHRINERS HOSPITAL FOR CHILDREN	Pediatric	3	0	0	1078
SOUTHERN INYO HOSPITAL	Community	3	0	0	25

*Long-term acute care

Source: Methicillin-Resistant *Staphylococcus aureus* and Vancomycin-Resistant *Enterococcus* Bloodstream Infections In California General Acute Care Hospitals, April 2010 Through March 2011